

Fill in this information to identify your case:

United States Bankruptcy Court for the:

**Western District of Texas**

Case number (If known): \_\_\_\_\_ Chapter you are filing under:



Chapter 7



Chapter 11



Chapter 12



Chapter 13



Check if this is an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Identify Yourself

#### 1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

#### About Debtor 1:

**Christine**

First name

**Elizabeth**

Middle name

**White**

Last name

Suffix (Sr., Jr, II, III)

#### About Debtor 2 (Spouse Only in a Joint Case):

**Brian**

First name

**Mark**

Middle name

**White**

Last name

Suffix (Sr., Jr, II, III)

#### 2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

First name

Middle name

Last name

Business name (if applicable)

Business name (if applicable)

First name

Middle name

Last name

Business name (if applicable)

Business name (if applicable)

#### 3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 8 1 2 4

OR

9xx - xx - \_\_\_\_

xxx - xx - 4 4 6 4

OR

9xx - xx - \_\_\_\_

Debtor 1  
Debtor 2

**Christine  
Brian**

First Name

**Elizabeth  
Mark**

Middle Name

**White  
White**

Last Name

Case number (if known) \_\_\_\_\_

**About Debtor 1:**

**About Debtor 2 (Spouse Only in a Joint Case):**

**4. Your Employer Identification  
Number (EIN), if any.**

EIN

EIN

EIN

EIN

**5. Where you live**

**5844 Back Bay Lane**

Number Street

**Austin, TX 78739**

City State ZIP Code

**Travis**

County

**If your mailing address is different from the one above,  
fill it in here.** Note that the court will send any notices to  
you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**If Debtor 2 lives at a different address:**

Number Street

City State ZIP Code

County

**If Debtor 2's mailing address is different from yours, fill  
it in here.** Note that the court will send any notices to you  
at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**6. Why you are choosing *this*  
district to file for bankruptcy**

*Check one:*

☒ Over the last 180 days before filing this petition, I  
have lived in this district longer than in any other  
district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Check one:*

☐ Over the last 180 days before filing this petition, I  
have lived in this district longer than in any other  
district.

☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.
 

☒ Chapter 7
 ☐ Chapter 11
 ☐ Chapter 12
 ☐ Chapter 13

8. How you will pay the fee

☒ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
 ☐ I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
 ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

☒ No.
 ☐ Yes.
 District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  

MM / DD / YYYY

 District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  

MM / DD / YYYY

 District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  

MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

☒ No.
 ☐ Yes.
 Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  

MM / DD / YYYY

 Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  

MM / DD / YYYY

11. Do you rent your residence?

☐ No. Go to line 12.
 ☒ Yes. Has your landlord obtained an eviction judgment against you?
 

☒ No. Go to line 12.
 ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1  
Debtor 2

**Christine  
Brian**

First Name

**Elizabeth  
Mark**

Middle Name

**White  
White**

Last Name

Case number (if known) \_\_\_\_\_

**Part 3:** Report About Any Businesses You Own as a Sole Proprietor

**12. Are you a sole proprietor of any full- or part-time business?**

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

☒ No. Go to Part 4.

☐ Yes. Name and location of business

\_\_\_\_\_  
Name of business, if any

\_\_\_\_\_  
Number Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP Code

*Check the appropriate box to describe your business:*

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))

☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))

☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))

☐ None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a *small business debtor*?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

- ☒ No.
- ☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number

Street

City

State

ZIP Code

Debtor 1  
Debtor 2

**Christine  
Brian**

First Name

**Elizabeth  
Mark**

Middle Name

**White  
White**

Last Name

Case number (if known) \_\_\_\_\_

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as “incurred by an individual primarily for a personal, family, or household purpose.”  
☒ No. Go to line 16b.  
☐ Yes. Go to line 17.

16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  
☐ No. Go to line 16c.  
☒ Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

17. Are you filing under Chapter 7?

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

☐ No. I am not filing under Chapter 7. Go to line 18.  
☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  

☒ No  
☐ Yes

18. How many creditors do you estimate that you owe?

☐ 1-49  
☒ 50-99  
☐ 100-199  
☐ 200-999

☐ 1,000-5,000  
☐ 5,001-10,000  
☐ 10,001-25,000

☐ 25,001-50,000  
☐ 50,000-100,000  
☐ More than 100,000

19. How much do you estimate your assets to be worth?

☐ \$0-\$50,000  
☐ \$50,001-\$100,000  
☒ \$100,001-\$500,000  
☐ \$500,001-\$1 million

☐ \$1,000,001-\$10 million  
☐ \$10,000,001-\$50 million  
☐ \$50,000,001-\$100 million  
☐ \$100,000,001-\$500 million

☐ \$500,000,001-\$1 billion  
☐ \$1,000,000,001-\$10 billion  
☐ \$10,000,000,001-\$50 billion  
☐ More than \$50 billion

20. How much do you estimate your liabilities to be?

☐ \$0-\$50,000  
☐ \$50,001-\$100,000  
☐ \$100,001-\$500,000  
☒ \$500,001-\$1 million

☐ \$1,000,001-\$10 million  
☐ \$10,000,001-\$50 million  
☐ \$50,000,001-\$100 million  
☐ \$100,000,001-\$500 million

☐ \$500,000,001-\$1 billion  
☐ \$1,000,000,001-\$10 billion  
☐ \$10,000,000,001-\$50 billion  
☐ More than \$50 billion

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Christine Elizabeth White

Christine Elizabeth White, Debtor 1

Executed on 05/01/2025

MM/ DD/ YYYY

X /s/ Brian Mark White

Brian Mark White, Debtor 2

Executed on 05/01/2025

MM/ DD/ YYYY

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

page 7

Debtor 1  
Debtor 2

**Christine  
Brian**

First Name

**Elizabeth  
Mark**

Middle Name

**White  
White**

Last Name

Case number (if known) \_\_\_\_\_

**For your attorney, if you are  
represented by one**

**If you are not represented by an  
attorney, you do not need to file this  
page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**X**

**/s/ Michael V. Baumer**

Signature of Attorney for Debtor

Date **05/01/2025**

MM / DD / YYYY

**Michael V. Baumer**

Printed name

**Law Office of Michael Baumer**

Firm name

**P.O. Box 1818**

Number Street

**Liberty Hill**

City

**TX**

State

**78642-1818**

ZIP Code

Contact phone **(512) 476-8707**

Email address **baumerlaw@baumerlaw.com**

**01931920**

Bar number

**TX**

State



Fill in this information to identify your case and this filing:

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Brian</u>	<u>Mark</u>	<u>White</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>Western</u> District of <u>Texas</u>			
Case number _____			

☐ Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☒ No. Go to Part 2.  
☐ Yes. Where is the property?

1.1 \_\_\_\_\_  
Street address, if available, or other description  
\_\_\_\_\_  
\_\_\_\_\_  
City State ZIP Code  
\_\_\_\_\_  
County

**What is the property?** Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \_\_\_\_\_

Current value of the portion you own? \_\_\_\_\_

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.  
\_\_\_\_\_

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here .....



\$0.00

#### Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No  
☒ Yes

3.1 Make: Honda Who has an interest in the property? Check one.  
Model: Passport Elite ☐ Debtor 1 only  
Year: 2019 ☐ Debtor 2 only  
Approximate mileage: 125000 ☒ Debtor 1 and Debtor 2 only  
Other information: ☐ At least one of the debtors and another  
☒ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?  
\$20,376.00

Current value of the portion you own?  
\$20,376.00

If you own or have more than one, describe here:

3.2 Make: Volvo Who has an interest in the property? Check one.  
Model: XC60 ☐ Debtor 1 only  
Year: 2020 ☐ Debtor 2 only  
Approximate mileage: 82000 ☒ Debtor 1 and Debtor 2 only  
Other information: ☐ At least one of the debtors and another  
☒ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?  
\$22,425.00

Current value of the portion you own?  
\$22,425.00

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No  
☐ Yes

4.1 Make: \_\_\_\_\_ Who has an interest in the property? Check one.  
Model: \_\_\_\_\_ ☐ Debtor 1 only  
Year: \_\_\_\_\_ ☐ Debtor 2 only  
Other information: ☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?  
\_\_\_\_\_

Current value of the portion you own?  
\_\_\_\_\_

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here \_\_\_\_\_ →

\$42,801.00

**Part 3:** Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

**6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware☐ No☒ Yes. Describe. ....**See Attached.****\$5,890.00****7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ No☒ Yes. Describe. ....**See Attached.****\$3,450.00****8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe. ....**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☐ No☒ Yes. Describe. ....**craft supplies****misc sporting goods****\$400.00****10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☒ No☐ Yes. Describe. ....**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe. ....**See Attached.****\$2,500.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe. ....**men's jewelry****women's jewelry****\$850.00**

**13. Non-farm animals***Examples:* Dogs, cats, birds, horses☐ No☒ Yes. Describe. ....

dog

\$0.00**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific  
information. ....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here** .....\$13,090.00**Part 4:** Describe Your Financial Assets**Do you own or have any legal or equitable interest in any of the following?****Current value of the  
portion you own?**  
Do not deduct secured  
claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☐ No☒ Yes ..... Cash: .....\$75.00

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes .....

Institution name:

17.1. Checking account:	<u>Bank of America ending 1407</u>	<u>\$2.50</u>
17.2. Checking account:	<u>Bank of America ending 1690</u>	<u>\$0.00</u>
17.3. Checking account:	<u>UFCU checking 2385</u>	<u>\$6.81</u>
17.4. Checking account:	<u>UFCU ending 2382</u>	<u>\$6.79</u>
17.5. Checking account:	<u>UFCU teen account cking 3482-00</u>	<u>\$31.08</u>
17.6. Savings account:	<u>Member's Choice CU savings ening 0980</u>	<u>\$0.00</u>
17.7. Savings account:	<u>UFCU 2382 savings</u>	<u>\$0.00</u>
17.8. Savings account:	<u>UFCU ending 2385</u>	<u>\$5.00</u>
17.9. Savings account:	<u>UFCU teen account savings 3482-08</u>	<u>\$0.00</u>
17.10. Savings account:	<u>Wells Fargo minor savings 8052</u>	<u>\$3.81</u>
17.11. Savings account:	<u>Wells Fargo savings 9894</u>	<u>\$0.18</u>
17.12. Other financial account:	<u>Greenlight App</u>	<u>\$25.50</u>
17.13. Other financial account:	<u>Greenlight App - teen</u>	<u>\$3.75</u>
17.14. Other financial account:	<u>Paypal</u>	<u>\$0.00</u>
17.15. Other financial account:	<u>Venmo</u>	<u>\$1.21</u>
17.16. Other financial account:	<u>Venmo</u>	<u>\$15.23</u>

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

☒ No☐ Yes ..... Institution or issuer name:

_____	_____
_____	_____
_____	_____

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☐ No☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

<u>MashUp Foods Inc</u>	<u>100.00%</u>	<u>\$0.00</u>
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**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No☐ Yes. Give specific  
information about  
them.....

Issuer name:

_____	_____
_____	_____
_____	_____

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No☒ Yes. List each  
account separately.

Type of account:

Institution name:

401(k) or similar plan:

Hilltop Holdings Schwab 401K\$110,243.00

IRA:

Edward Jones Roth IRA\$10,002.00**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☐ No☒ Yes .....

Institution name or individual:

Other:

Landlord\$2,400.00**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes .....

Issuer name and description:

_____	_____
_____	_____
_____	_____

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes .....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

_____	_____
_____	_____
_____	_____

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**☐ No☒ Yes. Give specific information about them. ...**John S. Jones Longstaff Trust (Bahamas Trust) - Debtor receives \$1800 per quarter and can receive up to \$5000 additional upon request and approval of disbursement.****\$19,544.00****26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☐ No☒ Yes. Give specific information about them. ...**PickleSmash - registered brand****\$0.00****27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☐ No☒ Yes. Give specific information about them. ...**NMLS****TDL****\$0.00****Money or property owed to you?****Current value of the portion you own?**  
Do not deduct secured claims or exemptions.**28. Tax refunds owed to you**☐ No☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....**2024 refund and pro-rated 2025 tax refund - no refund expected**

Federal:

**\$0.00**

State:

Local:

**29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☒ No☐ Yes. Give specific information. ....

Alimony:

Maintenance:

Support:

Divorce settlement:

Property settlement:

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No☐ Yes. Give specific information. ....**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ No☒ Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

Farmers Ins rentersdebtors\$0.00Primerica term policiesdebtors\$0.00Progressive autodebtors\$0.00**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information. ....**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No☐ Yes. Describe each claim. ....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim. ....**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information. ....**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** .....**\$142,365.86****Part 5:** Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6.☐ Yes. Go to line 38.



**Current value of the  
portion you own?**  
Do not deduct secured  
claims or exemptions.

**38. Accounts receivable or commissions you already earned**☒ No☐ Yes. Describe. ....

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**39. Office equipment, furnishings, and supplies**

*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☒ No☐ Yes. Describe. ....

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**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**☒ No☐ Yes. Describe. ....

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**41. Inventory**☒ No☐ Yes. Describe. ....

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**42. Interests in partnerships or joint ventures**☒ No☐ Yes. Describe .....

Name of entity:

% of ownership:

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**43. Customer lists, mailing lists, or other compilations**☒ No☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?☐ No☐ Yes. Describe. ....

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## 44. Any business-related property you did not already list

- ☒ No
- ☐ Yes. Give specific information .....


45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here .....

**\$0.00****Part 6:** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
If you own or have an interest in farmland, list it in Part 1.

## 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
- ☐ Yes. Go to line 47.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

## 47. Farm animals

Examples: Livestock, poultry, farm-raised fish

- ☒ No
- ☐ Yes .....

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## 48. Crops—either growing or harvested

- ☒ No
- ☐ Yes. Give specific information. ....

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## 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☒ No
- ☐ Yes .....

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## 50. Farm and fishing supplies, chemicals, and feed

- ☒ No
- ☐ Yes .....

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## 51. Any farm- and commercial fishing-related property you did not already list

☒ No☐ Yes. Give specific information. ....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here ..... →

\$0.00

**Part 7:** Describe All Property You Own or Have an Interest in That You Did Not List Above

## 53. Do you have other property of any kind you did not already list?

*Examples:* Season tickets, country club membership☒ No☐ Yes. Give specific information. ....

54. Add the dollar value of all of your entries from Part 7. Write that number here ..... →

\$0.00

**Part 8:** List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 ..... →

\$0.00

56. Part 2: Total vehicles, line 5 

\$42,801.00

57. Part 3: Total personal and household items, line 15 

\$13,090.00

58. Part 4: Total financial assets, line 36 

\$142,365.86

59. Part 5: Total business-related property, line 45 

\$0.00

60. Part 6: Total farm- and fishing-related property, line 52 

\$0.00

61. Part 7: Total other property not listed, line 54 + 

\$0.00

62. Total personal property. Add lines 56 through 61. ....

\$198,256.86

Copy personal property total →

+ \$198,256.86

63. Total of all property on Schedule A/B. Add line 55 + line 62. ....

\$198,256.86

## Continuation Page

6.	Household goods and furnishings	
	art	\$150.00
	bedroom	\$225.00
	bedroom 1	\$650.00
	bedroom 3	\$75.00
	books	\$200.00
	freezer	\$65.00
	kitchenware	\$400.00
	living room (sofa, chair, tables, lamps, rug, etc)	\$1,400.00
	misc electronics	\$700.00
	misx household goods	\$750.00
	office	\$375.00
	refrigerator	\$100.00
	refrigerator	\$50.00
	table and chairs	\$100.00
	tools	\$500.00
	washer and dryer	\$150.00
7.	Electronics	
	cell phones (3)	\$1,250.00
	laptops (2)	\$1,000.00
	printer	\$100.00
	televisions (5)	\$1,100.00
11.	Clothes	
	men's clothing	\$500.00
	misc girl's clothing	\$1,000.00
	women's clothing and accessories	\$1,000.00

Fill in this information to identify your case:

Debtor 1	<b>Christine</b>	<b>Elizabeth</b>	<b>White</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Brian</b>	<b>Mark</b>	<b>White</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Western</b>		District of <b>Texas</b>
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

**For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.**

### Part 1: Identify the Property You Claim as Exempt

1. **Which set of exemptions are you claiming?** *Check one only, even if your spouse is filing with you.*

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. **For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own  Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim  <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description:	<b>2019 Honda Passport Elite</b>	<b>\$20,376.00</b>	<input type="checkbox"/>	<b>11 U.S.C. § 522(d)(2)(Allocated: \$4,450.00)</b>
Line from <i>Schedule A/B</i> :	<b>3.1</b>		<input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
			<input checked="" type="checkbox"/> <b>\$10,024.00</b>	<b>11 U.S.C. § 522(d)(5)</b>
			<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

3. **Are you claiming a homestead exemption of more than \$214,000?**

(Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
 Debtor 2 Brian Mark White  
 First Name Middle Name Last Name

**Part 2:** Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>2020 Volvo XC60</u>  Line from Schedule A/B: <u>3.2</u>	<u>\$22,425.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit <input checked="" type="checkbox"/> <u>\$1,134.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(2)(Allocated: \$0.00)</u>  <u>11 U.S.C. § 522(d)(5)</u>
Brief description: <u>misc electronics</u>  Line from Schedule A/B: <u>6</u>	<u>\$700.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$700.00)</u>
Brief description: <u>living room (sofa, chair, tables, lamps, rug, etc)</u>  Line from Schedule A/B: <u>6</u>	<u>\$1,400.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$1,400.00)</u>
Brief description: <u>refrigerator</u>  Line from Schedule A/B: <u>6</u>	<u>\$100.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$100.00)</u>
Brief description: <u>kitchenware</u>  Line from Schedule A/B: <u>6</u>	<u>\$400.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$400.00)</u>
Brief description: <u>table and chairs</u>  Line from Schedule A/B: <u>6</u>	<u>\$100.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$100.00)</u>
Brief description: <u>bedroom 1</u>  Line from Schedule A/B: <u>6</u>	<u>\$650.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$650.00)</u>

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
 Debtor 2 Brian Mark White  
 First Name Middle Name Last Name

**Part 2:** Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: <u>bedroom</u> Line from Schedule A/B: <u>6</u>	<u>\$225.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$225.00)</u>
Brief description: <u>bedroom 3</u> Line from Schedule A/B: <u>6</u>	<u>\$75.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$75.00)</u>
Brief description: <u>office</u> Line from Schedule A/B: <u>6</u>	<u>\$375.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$375.00)</u>
Brief description: <u>refrigerator</u> Line from Schedule A/B: <u>6</u>	<u>\$50.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$50.00)</u>
Brief description: <u>freezer</u> Line from Schedule A/B: <u>6</u>	<u>\$65.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$65.00)</u>
Brief description: <u>washer and dryer</u> Line from Schedule A/B: <u>6</u>	<u>\$150.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$150.00)</u>
Brief description: <u>tools</u> Line from Schedule A/B: <u>6</u>	<u>\$500.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$500.00)</u>
Brief description: <u>misx household goods</u> Line from Schedule A/B: <u>6</u>	<u>\$750.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$750.00)</u>
Brief description: <u>books</u> Line from Schedule A/B: <u>6</u>	<u>\$200.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$200.00)</u>

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_

Debtor 2 Brian Mark White

First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: <u>art</u> Line from Schedule A/B: <u>6</u>	<u>\$150.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$150.00)</u>
Brief description: <u>laptops (2)</u> Line from Schedule A/B: <u>7</u>	<u>\$1,000.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$1,000.00)</u>
Brief description: <u>cell phones (3)</u> Line from Schedule A/B: <u>7</u>	<u>\$1,250.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$1,250.00)</u>
Brief description: <u>televisions (5)</u> Line from Schedule A/B: <u>7</u>	<u>\$1,100.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$1,100.00)</u>
Brief description: <u>printer</u> Line from Schedule A/B: <u>7</u>	<u>\$100.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$100.00)</u>
Brief description: <u>misc sporting goods</u> Line from Schedule A/B: <u>9</u>	<u>\$200.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$200.00)</u>
Brief description: <u>craft supplies</u> Line from Schedule A/B: <u>9</u>	<u>\$200.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$200.00)</u>
Brief description: <u>men's clothing</u> Line from Schedule A/B: <u>11</u>	<u>\$500.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$500.00)</u>
Brief description: <u>women's clothing and accessories</u> Line from Schedule A/B: <u>11</u>	<u>\$1,000.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$1,000.00)</u>
Brief description: <u>misc girl's clothing</u> Line from Schedule A/B: <u>11</u>	<u>\$1,000.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: \$1,000.00)</u>



Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
 Debtor 2 Brian Mark White  
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: <u>men's jewelry</u> Line from Schedule A/B: <u>12</u>	<u>\$550.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(4)(Allocated: \$550.00)</u>
Brief description: <u>women's jewelry</u> Line from Schedule A/B: <u>12</u>	<u>\$300.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(4)(Allocated: \$300.00)</u>
Brief description: <u>dog</u> Line from Schedule A/B: <u>13</u>	<u>\$0.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)(Allocated: )</u>
Brief description: <u>cash</u> Line from Schedule A/B: <u>16</u>	<u>\$75.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$75.00)</u>
Brief description: <u>Bank of America ending 1407 Checking account</u> Line from Schedule A/B: <u>17</u>	<u>\$2.50</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$2.50)</u>
Brief description: <u>Bank of America ending 1690 Checking account</u> Line from Schedule A/B: <u>17</u>	<u>\$0.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$0.00)</u>
Brief description: <u>UFCU ending 2382 Checking account</u> Line from Schedule A/B: <u>17</u>	<u>\$6.79</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$6.79)</u>
Brief description: <u>UFCU ending 2385 Savings account</u> Line from Schedule A/B: <u>17</u>	<u>\$5.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$5.00)</u>
Brief description: <u>Member's Choice CU savings ening 0980 Savings account</u> Line from Schedule A/B: <u>17</u>	<u>\$0.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$0.00)</u>

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
 Debtor 2 Brian Mark White  
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: <b>UFCU checking 2385</b> <u>Checking account</u>	<u>\$6.81</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$6.81)</u>
Line from Schedule A/B: <u>17</u>			
Brief description: <b>UFCU 2382 savings</b> <u>Savings account</u>	<u>\$0.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$0.00)</u>
Line from Schedule A/B: <u>17</u>			
Brief description: <b>Wells Fargo savings 9894</b> <u>Savings account</u>	<u>\$0.18</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$0.18)</u>
Line from Schedule A/B: <u>17</u>			
Brief description: <b>Wells Fargo minor savings 8052</b> <u>Savings account</u>	<u>\$3.81</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$3.81)</u>
Line from Schedule A/B: <u>17</u>			
Brief description: <b>Venmo</b> <u>Other financial account</u>	<u>\$15.23</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$15.23)</u>
Line from Schedule A/B: <u>17</u>			
Brief description: <b>Venmo</b> <u>Other financial account</u>	<u>\$1.21</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$1.21)</u>
Line from Schedule A/B: <u>17</u>			
Brief description: <b>UFCU teen account cking 3482-00</b> <u>Checking account</u>	<u>\$31.08</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)(Allocated: \$31.08)</u>
Line from Schedule A/B: <u>17</u>			

Debtor 1 **Christine Elizabeth White** Case number (if known) \_\_\_\_\_  
 Debtor 2 **Brian Mark White**  
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <b>UFCU teen account savings 3482-08</b> <u>Savings account</u>  Line from Schedule A/B: <u>17</u>	<u>\$0.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)(Allocated: \$0.00)</b>
Brief description: <b>Greenlight App</b> <u>Other financial account</u>  Line from Schedule A/B: <u>17</u>	<u>\$25.50</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)(Allocated: \$25.50)</b>
Brief description: <b>Paypal</b> <u>Other financial account</u>  Line from Schedule A/B: <u>17</u>	<u>\$0.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)(Allocated: \$0.00)</b>
Brief description: <b>Greenlight App - teen</b> <u>Other financial account</u>  Line from Schedule A/B: <u>17</u>	<u>\$3.75</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)(Allocated: \$3.75)</b>
Brief description: <b>Edward Jones Roth IRA</b>  Line from Schedule A/B: <u>21</u>	<u>\$10,002.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(12)(Allocated: \$10,002.00)</b>
Brief description: <b>Hilltop Holdings Schwab 401K</b>  Line from Schedule A/B: <u>21</u>	<u>\$110,243.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(12)(Allocated: \$110,243.00)</b>
Brief description: <b>Landlord</b> <u>Other</u>  Line from Schedule A/B: <u>22</u>	<u>\$2,400.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)(Allocated: \$2,400.00)</b>

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>	Case number (if known) _____
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>	
	First Name	Middle Name	Last Name	

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	John S. Jones Longstaff Trust (Bahamas Trust) - Debtor receives \$1800 per quarter and can receive up to \$5000 additional upon request and approval of disbursement.	\$19,544.00		
Line from Schedule A/B:	25		<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)(Allocated: \$19,544.00)
Brief description:	Primerica term policies	\$0.00		
Line from Schedule A/B:	31		<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(7)(Allocated: )

**UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF TEXAS  
AUSTIN DIVISION**

IN RE: **White, Christine Elizabeth**  
**White, Brian Mark**

CASE NO  
CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real Estate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicle	\$42,801.00	\$27,193.00	\$15,608.00	\$15,608.00	\$0.00
4.	Watercraft, trailers, motors homes, and accessories	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$5,890.00	\$0.00	\$5,890.00	\$5,890.00	\$0.00
7.	Electronics	\$3,450.00	\$0.00	\$3,450.00	\$3,450.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$400.00	\$0.00	\$400.00	\$400.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$2,500.00	\$0.00	\$2,500.00	\$2,500.00	\$0.00
12.	Jewelry	\$850.00	\$0.00	\$850.00	\$850.00	\$0.00
13.	Nonfarm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$75.00	\$0.00	\$75.00	\$75.00	\$0.00
17.	Deposits of money	\$101.86	\$0.00	\$101.86	\$101.86	\$0.00
18.	Bonds, mutual funds, or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Bonds and other financial instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$120,245.00	\$0.00	\$120,245.00	\$120,245.00	\$0.00
22.	Security deposits and prepayments	\$2,400.00	\$0.00	\$2,400.00	\$2,400.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interest in a qualified education fund, such as an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equitable or future interests in property	\$19,544.00	\$0.00	\$19,544.00	\$19,544.00	\$0.00

**UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF TEXAS  
AUSTIN DIVISION**

IN RE: **White, Christine Elizabeth**  
**White, Brian Mark**

CASE NO  
CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet #1*

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

<b>No.</b>	<b>Category</b>	<b>Gross Property Value</b>	<b>Total Encumbrances</b>	<b>Total Equity</b>	<b>Total Amount Exempt</b>	<b>Total Amount Non-Exempt</b>
26.	Copyrights, trademarks, websites and other intellectual property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, Franchises, and other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts owed to the debtor	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Interest in property from deceased	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims against third parties	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	All other claims, includes contingent/unliquidated claims, counter claims, and creditor set offs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Other financial asset	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts receivable	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Machinery, fixtures and equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer lists	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Other businessrelated property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Other farm or fishing related property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF TEXAS  
AUSTIN DIVISION**

IN RE:     **White, Christine Elizabeth**  
          **White, Brian Mark**

CASE NO  
  
CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet #2*

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

<b>No.</b>	<b>Category</b>	<b>Gross Property Value</b>	<b>Total Encumbrances</b>	<b>Total Equity</b>	<b>Total Amount Exempt</b>	<b>Total Amount Non-Exempt</b>
53.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTALS:</b>		<b>\$198,256.86</b>	<b>\$27,193.00</b>	<b>\$171,063.86</b>	<b>\$171,063.86</b>	<b>\$0.00</b>

**UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF TEXAS  
AUSTIN DIVISION**

IN RE:     **White, Christine Elizabeth**  
          **White, Brian Mark**

CASE NO  
  
CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet #3*

**Surrendered Property:**

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

Property Description	Market Value	Lien	Equity
<b><u>Real Property</u></b>			
(None)			
<b><u>Personal Property</u></b>			
(None)			
<b>TOTALS:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Non-exempt Property by Item:**

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
<b><u>Real Property</u></b>				
(None)				
<b><u>Personal Property</u></b>				
(None)				
<b>TOTALS:</b>	<b>\$198,256.86</b>	<b>\$27,193.00</b>	<b>\$171,063.86</b>	<b>\$0.00</b>



**UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF TEXAS  
AUSTIN DIVISION**

IN RE: **White, Christine Elizabeth**  
**White, Brian Mark**

CASE NO  
CHAPTER 7

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

*Continuation Sheet #4*

<b>Summary</b>	
A. Gross Property Value (not including surrendered property)	<b>\$198,256.86</b>
B. Gross Property Value of Surrendered Property	<b>\$0.00</b>
C. Total Gross Property Value (A+B)	<b>\$198,256.86</b>
D. Gross Amount of Encumbrances (not including surrendered property)	<b>\$27,193.00</b>
E. Gross Amount of Encumbrances on Surrendered Property	<b>\$0.00</b>
F. Total Gross Encumbrances (D+E)	<b>\$27,193.00</b>
G. Total Equity (not including surrendered property) / (A-D)	<b>\$171,063.86</b>
H. Total Equity in surrendered items (B-E)	<b>\$0.00</b>
I. Total Equity (C-F)	<b>\$171,063.86</b>
J. Total Exemptions Claimed (Wild Card Used: \$30,849.61, Available: \$0.39)	<b>\$171,063.86</b>
K. Total Non-Exempt Property Remaining (G-J)	<b>\$0.00</b>

Fill in this information to identify your case:

Debtor 1 **Christine Elizabeth White**  
First Name Middle Name Last Name

Debtor 2 **Brian Mark White**  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **Western** District of **Texas**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion
Do not deduct the value of collateral.		If any

2.1	Members Choice	Describe the property that secures the claim:	\$5,902.00	\$20,376.00	\$0.00
	Creditor's Name <b>PO Box 20248</b> Number Street <b>Waco, TX 76702-0247</b> City State ZIP Code <b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <b>7/19</b> Last 4 digits of account number <b>8 0 0 2</b>	<b>2019 Honda Passport Elite</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Nature of lien.</b> Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____			

Add the dollar value of your entries in Column A on this page. Write that number here: **\$5,902.00**

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C	
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any	
2.2	<b>Members Choice</b> Creditor's Name <b>PO Box 20248</b> Number Street <b>Waco, TX 76702-0247</b> City State ZIP Code <b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>8/21</u> Last 4 digits of account number <u>8</u> <u>0</u> <u>0</u> <u>3</u>	Describe the property that secures the claim: <b>2020 Volvo XC60</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Nature of lien.</b> Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	<b>\$21,291.00</b>	<b>\$22,425.00</b>	<b>\$0.00</b>
Add the dollar value of your entries in Column A on this page. Write that number here:		<b>\$21,291.00</b>			
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<b>\$27,193.00</b>			

Fill in this information to identify your case:

Debtor 1 **Christine Elizabeth White**  
First Name Middle Name Last Name

Debtor 2 **Brian Mark White**  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **Western** District of **Texas**

Case number \_\_\_\_\_  
(if known)

☐ Check if this is an amended filing

## Official Form 106E/F

# Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.  
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

			Total claim	Priority amount	Nonpriority amount
2.1	<b>Internal Revenue Service</b>	Last 4 digits of account number _____	<b>\$10,000.00</b>	<b>\$10,000.00</b>	<b>\$0.00</b>
	Priority Creditor's Name	When was the debt incurred?			
	<b>Special Procedures Staff - Insolvency</b>	<b>various</b>			
	<b>Po Box 7346</b>	As of the date you file, the claim is: Check all that apply.			
	Number Street	<input type="checkbox"/> Contingent			
	<b>Philadelphia, PA 19101-7346</b>	<input checked="" type="checkbox"/> Unliquidated			
	City State ZIP Code	<input type="checkbox"/> Disputed			
	Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Domestic support obligations			
	<input type="checkbox"/> Debtor 2 only	<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government			
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated			
	<input checked="" type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other. Specify _____			
	<input type="checkbox"/> Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				
	Remarks: possible personal liability for 941 taxes for Mashup Foods Inc. - returns still to be filed - amount estimated				

Debtor 1     Christine                      Elizabeth                      White                      Case number (if known) \_\_\_\_\_

Debtor 2     Brian                                  Mark                                  White

First Name                      Middle Name                      Last Name

**Part 1:     Your PRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			Total claim	Priority amount	Nonpriority amount
<u>2.2</u>	<b>Texas Comptroller of Public Accounts</b> <hr/> Priority Creditor's Name <b>PO Box 13528 Capitol Station</b> <hr/> <b>Revenue Accounting Div - Bankruptcy Sect</b> <hr/> Number      Street <b>Austin, TX 78711</b> <hr/> City                      State                      ZIP Code	Last 4 digits of account number <u>      </u> <u>      </u> <u>      </u> <u>      </u> When was the debt incurred? <u>various</u>  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	<u>\$1,000.00</u>	<u>\$1,000.00</u>	<u>\$0.00</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  Remarks: possible personal liability for sales taxes for Mashup Foods Inc. - returns still to be filed - amount estimated					

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

				Total claim
4.1	<b>American Express</b>	Last 4 digits of account number	<u>1 0 0 9</u>	<b>\$23,592.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Po Box 981537</b>		<b>various</b>		
Number Street		As of the date you file, the claim is: Check all that apply.		
<b>El Paso, TX 79998-1537</b>		<input type="checkbox"/> Contingent		
City State ZIP Code		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.2	<b>American Express</b>	Last 4 digits of account number	<u>5 x x x</u>	<b>\$6,798.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Po Box 981537</b>		<b>various</b>		
Number Street		As of the date you file, the claim is: Check all that apply.		
<b>El Paso, TX 79998-1537</b>		<input type="checkbox"/> Contingent		
City State ZIP Code		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.3</b>	<b>Ashley Furniture</b>	Last 4 digits of account number	<u>x</u> <u>x</u> <u>x</u> <u>x</u>	<b>\$3,376.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>PO Box 965036</b>		<u>various</u>		
Number     Street		As of the date you file, the claim is: Check all that apply.		
<b>Orlando, FL 32896</b>		<input type="checkbox"/> Contingent		
City     State     ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

<b>4.4</b>	<b>Austin Regional Clinic</b>	Last 4 digits of account number	<u>5</u> <u>9</u> <u>0</u> <u>0</u>	<b>\$351.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>PO Box 660061</b>		<u>10/2024</u>		
Number     Street		As of the date you file, the claim is: Check all that apply.		
<b>Dallas, TX 75266-0061</b>		<input type="checkbox"/> Contingent		
City     State     ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>medical</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
 Debtor 2 Brian Mark White  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

4.5	<b>Austin Regional Clinic</b> Nonpriority Creditor's Name <u>Po Box 26726</u> Number Street  <u>Austin, TX 78755-0726</u> City State ZIP Code	Last 4 digits of account number <u>5 9 0 0</u> When was the debt incurred? <u>various</u>  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$151.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.6	<b>Bank of America</b> Nonpriority Creditor's Name <u>Po Box 982238</u> Number Street  <u>El Paso, TX 79998-2238</u> City State ZIP Code	Last 4 digits of account number <u>7 7 5 6</u> When was the debt incurred? <u>various</u>  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$2,506.00</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			



Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.7</b>	<b>Bank of America</b>	Last 4 digits of account number	<u>9</u> <u>6</u> <u>3</u> <u>8</u>	<b>\$2,502.00</b>
Nonpriority Creditor's Name		When was the debt incurred? <u>various</u>		
<b>Po Box 982238</b>				
Number     Street				
<b>El Paso, TX 79998-2238</b>		As of the date you file, the claim is: Check all that apply.		
City     State     ZIP Code		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input checked="" type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

<b>4.8</b>	<b>Barclay</b>	Last 4 digits of account number	<u>x</u> <u>x</u> <u>x</u> <u>x</u>	<b>\$5,718.00</b>
Nonpriority Creditor's Name		When was the debt incurred? <u>various</u>		
<b>PO Box 7247</b>				
Number     Street				
<b>Philadelphia, PA 19170</b>		As of the date you file, the claim is: Check all that apply.		
City     State     ZIP Code		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>	Case number (if known) _____
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<p><b>4.9</b> <u>Barclays Bank</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Po Box 60517</u></p> <p>Number                  Street</p> <p><u>City Industry, CA 91716-0517</u></p> <p>City                          State                          ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number    <u>1</u> <u>2</u> <u>8</u> <u>2</u></p> <p><b>When was the debt incurred?</b>                  <u>various</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p><b>\$20,717.00</b></p>
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<p><b>4.10</b> <u>BB4 a Series of Assure Labs 2021 LLC</u></p> <p>Nonpriority Creditor's Name</p> <p><u>190 N 10th St</u></p> <p>Number                  Street</p> <p><u>Brooklyn, NY 11211</u></p> <p>City                          State                          ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number    _____</p> <p><b>When was the debt incurred?</b>                  _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Notice only</u></p>	<p><b>\$0.00</b></p>
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Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
 Debtor 2 Brian Mark White  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.11</b>	<b>Bee Cave Capital LLC</b> Nonpriority Creditor's Name <u>832 Stonewall Ridge Lane</u> Number Street <u>Austin, TX 78746</u> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>	<b>\$0.00</b>
<b>4.12</b>	<b>Best Egg</b> Nonpriority Creditor's Name <u>PO Box 42912</u> Number Street <u>Philadelphia, PA 19101</u> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2 1 5 8</u> <b>When was the debt incurred?</b> <u>various</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>business loan</u>	<b>\$40,000.00</b>

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
 Debtor 2 Brian Mark White  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.13</b>	<b>Best Egg</b>	Last 4 digits of account number	<u>5 1 5 8</u>	<b>\$36,252.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>PO Box 42912</b>		<u>various</u>		
Number Street		As of the date you file, the claim is: Check all that apply.		
<b>Philadelphia, PA 19101</b>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City State ZIP Code		Type of NONPRIORITY unsecured claim:		
Who incurred the debt? Check one.		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>business loan</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
<b>4.14</b>	<b>Brian Ruane</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>1425 Broadway #435</b>				
Number Street		As of the date you file, the claim is: Check all that apply.		
<b>Seattle, WA 98122</b>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City State ZIP Code		Type of NONPRIORITY unsecured claim:		
Who incurred the debt? Check one.		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.15</b>	<b>Business Backer</b>	Last 4 digits of account number	<u>8</u> <u>9</u> <u>2</u> <u>7</u>	<b>\$6,501.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>10856 Reed Hartman Hwy #100</u>		<u>various</u>		
Number     Street		As of the date you file, the claim is: Check all that apply.		
<u>Cincinnati, OH 45242</u>		<input type="checkbox"/> Contingent		
City     State     ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>business loan</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

<b>4.16</b>	<b>Capital One</b>	Last 4 digits of account number	<u>9</u> <u>8</u> <u>1</u> <u>4</u>	<b>\$30,482.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>Po Box 60519</u>		<u>various</u>		
Number     Street		As of the date you file, the claim is: Check all that apply.		
<u>City Industry, CA 91716-0519</u>		<input type="checkbox"/> Contingent		
City     State     ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.17</b>	<b>Capital One</b>	Last 4 digits of account number	<u>8</u> <u>9</u> <u>8</u> <u>0</u>	<b>\$837.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Po Box 60519</b>		<u>various</u>		
Number     Street		As of the date you file, the claim is: Check all that apply.		
<b>City Industry, CA 91716-0519</b>		<input type="checkbox"/> Contingent		
City     State     ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

<b>4.18</b>	<b>Capital One</b>	Last 4 digits of account number	<u>0</u> <u>1</u> <u>7</u> <u>1</u>	<b>\$1,308.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Po Box 60519</b>		<u>various</u>		
Number     Street		As of the date you file, the claim is: Check all that apply.		
<b>City Industry, CA 91716-0519</b>		<input type="checkbox"/> Contingent		
City     State     ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.19</b>	<b>Capital One</b>	Last 4 digits of account number	<u>5</u> <u>7</u> <u>5</u> <u>4</u>	<b>\$8,731.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Po Box 60519</b>		<u>various</u>		
Number Street		As of the date you file, the claim is: Check all that apply.		
<b>City Industry, CA 91716-0519</b>		<input type="checkbox"/> Contingent		
City State ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

<b>4.20</b>	<b>Capital One</b>	Last 4 digits of account number	<u>8</u> <u>9</u> <u>8</u> <u>8</u>	<b>\$1,312.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Po Box 60519</b>		<u>various</u>		
Number Street		As of the date you file, the claim is: Check all that apply.		
<b>City Industry, CA 91716-0519</b>		<input type="checkbox"/> Contingent		
City State ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>	Case number (if known) _____
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.21</b>	<b>Comenity Capital Bank/Ikea</b>	Last 4 digits of account number	<u>4</u> <u>4</u> <u>6</u> <u>5</u>	<b>\$787.00</b>
	Nonpriority Creditor's Name			
	<b>PO Box 182120</b>	When was the debt incurred?	<u>various</u>	
	Number	Street		
	<b>Columbus, OH 43219</b>			
	City	State	ZIP Code	
	Who incurred the debt? Check one.			
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>			

<b>4.22</b>	<b>Coyote Logistics</b>	Last 4 digits of account number	<u>D</u> <u>S</u> <u>T</u> <u>X</u>	<b>\$0.00</b>
	Nonpriority Creditor's Name			
	<b>2545 W. Diversey Ave</b>	When was the debt incurred?	_____	
	Number	Street		
	<b>Chicago, IL 60647</b>			
	City	State	ZIP Code	
	Who incurred the debt? Check one.			
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>			



Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.23</b>	<b>Credit One Bank</b>	Last 4 digits of account number	<u>3</u> <u>8</u> <u>3</u> <u>2</u>	<b>\$2,128.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>PO Box 98872</b>		<u>various</u>		
Number Street		As of the date you file, the claim is: Check all that apply.		
<b>Las Vegas, NV 89193</b>		<input type="checkbox"/> Contingent		
City State ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

<b>4.24</b>	<b>Credit One Bank</b>	Last 4 digits of account number	<u>3</u> <u>8</u> <u>3</u> <u>2</u>	<b>\$2,128.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>PO Box 98872</b>		<u>various</u>		
Number Street		As of the date you file, the claim is: Check all that apply.		
<b>Las Vegas, NV 89193</b>		<input type="checkbox"/> Contingent		
City State ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.25</b>	<b>Damon Neth</b> Nonpriority Creditor's Name <b>10022 Estancia</b> Number     Street  <b>Austin, TX 78739</b> City     State     ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> _____  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Notice only</b></u>	<b>\$0.00</b>
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<b>4.26</b>	<b>Data Council</b> Nonpriority Creditor's Name <b>PO Box 74482</b> Number     Street  <b>Atlanta, GA 30374</b> City     State     ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> _____  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Notice only</b></u>	<b>\$0.00</b>
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Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.27</b>	<b>DC Scott</b> Nonpriority Creditor's Name <b>1202 W. Bitters Bldg 2</b> Number     Street <b>San Antonio, TX 78216</b> City     State     ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number     _____ <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>	<b>\$0.00</b>
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<b>4.28</b>	<b>Dell Children's Medical Center</b> Nonpriority Creditor's Name <b>Po Box 204301</b> Number     Street <b>Dallas, TX 75320-4301</b> City     State     ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>5</u> <u>9</u> <u>4</u> <u>2</u> <b>When was the debt incurred?</b> <u>2024</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>	<b>\$761.00</b>
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Debtor 1      Christine      Elizabeth      White      Case number (if known) \_\_\_\_\_

Debtor 2      Brian      Mark      White

First Name      Middle Name      Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

**4.29**      Dell Children's Medical Center      Last 4 digits of account number      5 9 4 2      **\$239.00**

Nonpriority Creditor's Name

Po Box 204301

Number      Street

Dallas, TX 75320-4301

City      State      ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**When was the debt incurred?**

9/2024

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Medical Bill

**4.30**      Diligent Services      Last 4 digits of account number      \_\_\_\_\_      **\$0.00**

Nonpriority Creditor's Name

2301 E. St Elmo #3-306

Number      Street

Austin, TX 78744

City      State      ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Notice only

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.31</b>	<b>Discover</b> Nonpriority Creditor's Name <u>PO Box 71242</u> Number     Street  <u>Charlotte, NC 28272-1242</u> City     State     ZIP Code  <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7</u> <u>3</u> <u>6</u> <u>8</u>  <b>When was the debt incurred?</b> <u>various</u>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<b>\$7,335.00</b>
<b>4.32</b>	<b>Discover</b> Nonpriority Creditor's Name <u>PO Box 71242</u> Number     Street  <u>Charlotte, NC 28272-1242</u> City     State     ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>x</u> <u>x</u> <u>x</u> <u>x</u>  <b>When was the debt incurred?</b> <u>various</u>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<b>\$14,684.00</b>

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_

Debtor 2 Brian Mark White

First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

4.33	<b>Egan Nelson LLP</b> Nonpriority Creditor's Name <u>221 W. 6th St #900</u> Number Street  <u>Austin, TX 78701</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>	<b>\$0.00</b>
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.34	<b>Elizabeth Berry</b> Nonpriority Creditor's Name <u>address unknown</u> Number Street  <u>liz.berry@gmail.com,</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>	<b>\$0.00</b>
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
 Debtor 2 Brian Mark White  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

4.35	<b>Emblem</b> Nonpriority Creditor's Name <u>PO Box 105555</u> Number Street  <u>Atlanta, GA 30348</u> City State ZIP Code  <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2 0 1 7</u>  <b>When was the debt incurred?</b> <u>various</u>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<b>\$500.00</b>
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4.36	<b>First National Legacy</b> Nonpriority Creditor's Name <u>500 E. 60th St N.</u> Number Street  <u>Sioux Falls, SD 57104</u> City State ZIP Code  <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2 9 7 0</u>  <b>When was the debt incurred?</b> <u>various</u>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<b>\$2,359.00</b>
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Debtor 1	<b>Christine</b>	<b>Elizabeth</b>	<b>White</b>	Case number (if known) _____
Debtor 2	<b>Brian</b>	<b>Mark</b>	<b>White</b>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.37</b>	<b>First Premier Bank</b>	Last 4 digits of account number	<u>  x  </u> <u>  x  </u> <u>  x  </u> <u>  x  </u>	<b>\$962.00</b>
	Nonpriority Creditor's Name			
	<b>3820 N. Louise Ave</b>	When was the debt incurred?	<u>  various  </u>	
	Number                  Street			
	<b>Sioux Falls, SD 57107</b>	As of the date you file, the claim is: Check all that apply.		
	City                          State                  ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.			
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>  Credit Card  </u>			

<b>4.38</b>	<b>Getida</b>	Last 4 digits of account number	<u>      </u> <u>      </u> <u>      </u> <u>      </u>	<b>\$0.00</b>
	Nonpriority Creditor's Name			
	<b>1345 Queen Anne Road</b>	When was the debt incurred?	<u>                    </u>	
	Number                  Street			
	<b>Teaneck, NJ 07666</b>	As of the date you file, the claim is: Check all that apply.		
	City                          State                  ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.			
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>  Notice only  </u>			



Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>	Case number (if known) _____
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.39</b>	<b>HEB</b>	Last 4 digits of account number _____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred? _____	
<b>2975 Regent Blvd #202531</b>			
Number                      Street			
<b>Irving, TX 75063</b>			
City                              State                      ZIP Code			
<b>Who incurred the debt?</b> Check one. <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b> </div> <div style="width: 50%;"> <b>As of the date you file, the claim is:</b> Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed         </div> </div>			
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Notice only</b></u>			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

<b>4.40</b>	<b>James Cole</b>	Last 4 digits of account number _____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred? _____	
<b>190 N 10th St,</b>			
Number                      Street			
<b>Brooklyn, NY 11211</b>			
City                              State                      ZIP Code			
<b>Who incurred the debt?</b> Check one. <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b> </div> <div style="width: 50%;"> <b>As of the date you file, the claim is:</b> Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed         </div> </div>			
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Notice only</b></u>			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>	Case number (if known) _____
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<p><b>4.41</b></p> <p><u>Jeffrey S. Pinsker, Trustee of Jeffrey</u></p> <p>Nonpriority Creditor's Name</p> <p><u>S. Pinsker Revocable Trust</u></p> <p><u>555 E. 5th #3021</u></p> <p>Number                  Street</p> <p><u>Austin, TX 78701</u></p> <p>City                          State                  ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number    _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Notice only</u></p>	<p><b>\$0.00</b></p>
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<p><b>4.42</b></p> <p><u>Jonathan Skaare</u></p> <p>Nonpriority Creditor's Name</p> <p><u>2504 S. 5th St Unit A</u></p> <p>Number                  Street</p> <p><u>Austin, TX 78704</u></p> <p>City                          State                  ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number    _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Notice only</u></p>	<p><b>\$0.00</b></p>
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Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>	Case number (if known) _____
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<div style="border: 1px solid black; padding: 2px;">4.43</div>	<b>Kapture Box</b> <hr/> Nonpriority Creditor's Name <b>3114 Garrison St</b> <hr/> Number                  Street  <hr/> <b>San Diego, CA 92106</b> <hr/> City                      State                  ZIP Code	Last 4 digits of account number <u>      </u>  When was the debt incurred? <u>                    </u>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>	<b>\$0.00</b>
<p><b>Who incurred the debt?</b> Check one.</p> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<p><b>Is the claim subject to offset?</b></p> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

<div style="border: 1px solid black; padding: 2px;">4.44</div>	<b>KeHe</b> <hr/> Nonpriority Creditor's Name <b>90t0 N. Schmid Rd</b> <hr/> Number                  Street  <hr/> <b>Romeoville, IL 60446</b> <hr/> City                      State                  ZIP Code	Last 4 digits of account number <u>      </u>  When was the debt incurred? <u>                    </u>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>	<b>\$0.00</b>
<p><b>Who incurred the debt?</b> Check one.</p> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<p><b>Is the claim subject to offset?</b></p> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>	Case number (if known) _____
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.45</b>	<b>Lending Club</b>	Last 4 digits of account number <u>2 5 1 2</u>	<b><u>\$36,121.00</u></b>
Nonpriority Creditor's Name <u>PO Box 884268</u>		When was the debt incurred? <u>various</u>	
Number _____ Street _____			
<u>Los Angeles, CA 90088-4268</u>			
City _____ State _____ ZIP Code _____			
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>business loan</u>			

  

<b>4.46</b>	<b>LoanBuilder - PayPal</b>	Last 4 digits of account number <u>5 4 7 7</u>	<b><u>\$40,725.00</u></b>
Nonpriority Creditor's Name <u>1930 Olney Ave</u>		When was the debt incurred? <u>10/2021</u>	
Number _____ Street _____			
<u>Cherry Hill, NJ 08003</u>			
City _____ State _____ ZIP Code _____			
Who incurred the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>business loan guaranty</u>			

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
 Debtor 2 Brian Mark White  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.47</b>	<b>Mandlik &amp; Rhodes</b> Nonpriority Creditor's Name <u>223 Applebee St</u> Number Street <u>Barrington, IL 60010</u> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>	<b>\$0.00</b>
<b>4.48</b>	<b>Marcus Goldman Sachs</b> Nonpriority Creditor's Name <u>PO Box 45400</u> Number Street <u>Salt Lake City, UT 84145-0400</u> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3 0 5 2</u> <b>When was the debt incurred?</b> <u>various</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>business loan</u>	<b>\$37,717.00</b>

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_

Debtor 2     Brian     Mark     White

First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.49</b>	<b>Matthew Gase</b> Nonpriority Creditor's Name <b>903 Dartmoor Dr.</b> Number                      Street  <b>Austin, TX 78746</b> City                              State                              ZIP Code	<b>Last 4 digits of account number</b> _____  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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<b>4.50</b>	<b>Matthew O-Hayer</b> Nonpriority Creditor's Name <b>2309 S. 4th St</b> Number                      Street  <b>Austin, TX 78704</b> City                              State                              ZIP Code	<b>Last 4 digits of account number</b> _____  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.51</b>	<b>Merrick Bank</b>	Last 4 digits of account number	<u>5</u> <u>4</u> <u>1</u> <u>0</u>	<b>\$3,180.00</b>
	Nonpriority Creditor's Name	When was the debt incurred?	<u>various</u>	
	<b>PO Box 9201</b>			
	Number     Street			
	<b>Old Bethpage, NY 11804</b>	As of the date you file, the claim is: Check all that apply.		
	City     State     ZIP Code	<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

<b>4.52</b>	<b>Merrick Bank</b>	Last 4 digits of account number	<u>x</u> <u>x</u> <u>x</u> <u>x</u>	<b>\$3,773.00</b>
	Nonpriority Creditor's Name	When was the debt incurred?	<u>various</u>	
	<b>Attn: Bankruptcy</b>			
	<b>PO Box 23356</b>	As of the date you file, the claim is: Check all that apply.		
	Number     Street	<input type="checkbox"/> Contingent		
	<b>Pittsburgh, PA 15222</b>	<input type="checkbox"/> Unliquidated		
	City     State     ZIP Code	<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.53</b>	<b>MJS Packaging</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred? _____		
<b>500 E. St. Johns Ave #2620-1010</b>				
Number Street				
<b>Austin, TX 78752</b>				
City State ZIP Code				
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent				
<input type="checkbox"/> Unliquidated				
<input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>				
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

<b>4.54</b>	<b>Nebraska Furniture Mart</b>	Last 4 digits of account number	<u>8 0 6 0</u>	<b>\$4,153.00</b>
Nonpriority Creditor's Name		When was the debt incurred? <u>various</u>		
<b>PO Box 2335</b>				
Number Street				
<b>Omaha, NE 68103-2335</b>				
City State ZIP Code				
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent				
<input type="checkbox"/> Unliquidated				
<input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>				
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				



Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>	Case number (if known) _____
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.55</b>	<b>Nebraska Furniture Mart</b>	Last 4 digits of account number	<u>5</u> <u>5</u> <u>1</u> <u>1</u>	<b><u>\$2,729.00</u></b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>PO Box 2335</b>		<u>various</u>		
Number                      Street				
<b>Omaha, NE 68103-2335</b>		As of the date you file, the claim is: Check all that apply.		
City                      State                      ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

  

<b>4.56</b>	<b>Nelnet</b>	Last 4 digits of account number	<u>x</u> <u>x</u> <u>x</u> <u>x</u>	<b><u>\$72,261.00</u></b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Po Box 82561</b>		<u>various</u>		
Number                      Street				
<b>Lincoln, NE 68501-2561</b>		As of the date you file, the claim is: Check all that apply.		
City                      State                      ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Student Loans</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>	Case number (if known) _____
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<div style="border: 1px solid black; padding: 2px;">4.57</div>	<b>Onramp Funds, Inc</b> <hr/> Nonpriority Creditor's Name <b>and eCommerce Funding LLC</b> <hr/> <b>7600 N. Capital of TX HWY Bldg 2, #200</b> <hr/> Number                  Street <b>Austin, TX 78731</b> <hr/> City                          State                  ZIP Code	Last 4 digits of account number    _____  When was the debt incurred? <u>various</u>  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>business loan guaranty</u>	<b>\$54,248.00</b>
<p><b>Who incurred the debt?</b> Check one.</p> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<p><b>Is the claim subject to offset?</b></p> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<div style="border: 1px solid black; padding: 2px;">4.58</div>	<b>Optimal Counsel</b> <hr/> Nonpriority Creditor's Name <b>500 E. St Johns Ave #2620-1010</b> <hr/> Number                  Street  <hr/> <b>Austin, TX 78752</b> <hr/> City                          State                  ZIP Code	Last 4 digits of account number    _____  When was the debt incurred?        _____  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice onlu</u>	<b>\$0.00</b>
<p><b>Who incurred the debt?</b> Check one.</p> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<p><b>Is the claim subject to offset?</b></p> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1      Christine      Elizabeth      White      Case number (if known) \_\_\_\_\_  
Debtor 2      Brian      Mark      White  
First Name      Middle Name      Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.59</b>	<b>Patillo Brown &amp; Hill LLP</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred? <u>2022-2024</u>		
<b>PO Box 20725</b>				
Number      Street				
<b>Waco, TX 76702-0725</b>				
City      State      ZIP Code				
Who incurred the debt? Check one.		As of the date you file, the claim is: Check all that apply.		
<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Disputed		
<input type="checkbox"/> At least one of the debtors and another		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Check if this claim is for a community debt		<input type="checkbox"/> Student loans		
		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

<b>4.60</b>	<b>Reap Commerce</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred? _____		
<b>1920 McKinney Ave Floor 7</b>				
Number      Street				
<b>Dallas, TX 75201</b>				
City      State      ZIP Code				
Who incurred the debt? Check one.		As of the date you file, the claim is: Check all that apply.		
<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Disputed		
<input type="checkbox"/> At least one of the debtors and another		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Check if this claim is for a community debt		<input type="checkbox"/> Student loans		
		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1      Christine      Elizabeth      White      Case number (if known) \_\_\_\_\_  
Debtor 2      Brian      Mark      White  
First Name      Middle Name      Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.61</b>	<b>Reap Marketing LLC</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred? _____		
<b>1920 McKinney Ave Floor 7</b>				
Number      Street				
_____				
<b>Dallas, TX 75201</b>				
City      State      ZIP Code				
<b>Who incurred the debt?</b> Check one.				
<input type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
<b>Is the claim subject to offset?</b>				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
<b>As of the date you file, the claim is:</b> Check all that apply.				
<input type="checkbox"/> Contingent				
<input type="checkbox"/> Unliquidated				
<input type="checkbox"/> Disputed				
<b>Type of NONPRIORITY unsecured claim:</b>				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>				

<b>4.62</b>	<b>Renfro Foods</b>	Last 4 digits of account number	<u>0</u> <u>2</u> <u>7</u> <u>0</u>	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred? <u>various</u>		
<b>815 Stella St</b>				
Number      Street				
_____				
<b>Fort Worth, TX 76104</b>				
City      State      ZIP Code				
<b>Who incurred the debt?</b> Check one.				
<input type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
<b>Is the claim subject to offset?</b>				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
<b>As of the date you file, the claim is:</b> Check all that apply.				
<input type="checkbox"/> Contingent				
<input type="checkbox"/> Unliquidated				
<input type="checkbox"/> Disputed				
<b>Type of NONPRIORITY unsecured claim:</b>				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>				

Debtor 1      Christine      Elizabeth      White      Case number (if known) \_\_\_\_\_  
Debtor 2      Brian      Mark      White  
First Name      Middle Name      Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.63</b>	<b>Ricardo Casas &amp; Laurel Casas</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred? _____		
<b>4224 Wyldwood Rd</b>				
Number      Street				
<b>Austin, TX 78739</b>		As of the date you file, the claim is: Check all that apply.		
City      State      ZIP Code		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

<b>4.64</b>	<b>Richard Riccardi 2002 Generation</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred? _____		
<b>Skipping Trust</b>				
<b>661 Forest Oaks Dr.</b>		As of the date you file, the claim is: Check all that apply.		
Number      Street		<input type="checkbox"/> Contingent		
<b>Mckinney, TX 75069</b>		<input type="checkbox"/> Unliquidated		
City      State      ZIP Code		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_

Debtor 2     Brian     Mark     White

First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.65</b>	<b>Robert A. Ziegler</b>	<b>Last 4 digits of account number</b> _____	<b>\$0.00</b>
Nonpriority Creditor's Name			
<b>900 S. Center St.</b>		<b>When was the debt incurred?</b> _____	
Number                      Street			
<b>Austin, TX 78704</b>		<b>As of the date you file, the claim is:</b> Check all that apply.	
City                              State                      ZIP Code		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
<b>Who incurred the debt?</b> Check one.		<b>Type of NONPRIORITY unsecured claim:</b>	
<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans	
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>	
<input type="checkbox"/> Check if this claim is for a community debt			
<b>Is the claim subject to offset?</b>			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

<b>4.66</b>	<b>Roland Jones Jr</b>	<b>Last 4 digits of account number</b> _____	<b>\$0.00</b>
Nonpriority Creditor's Name			
<b>381 CR 1070</b>		<b>When was the debt incurred?</b> _____	
Number                      Street			
<b>Hewitt, TX 76643</b>		<b>As of the date you file, the claim is:</b> Check all that apply.	
City                              State                      ZIP Code		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
<b>Who incurred the debt?</b> Check one.		<b>Type of NONPRIORITY unsecured claim:</b>	
<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans	
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>	
<input type="checkbox"/> Check if this claim is for a community debt			
<b>Is the claim subject to offset?</b>			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Debtor 1      Christine      Elizabeth      White      Case number (if known) \_\_\_\_\_  
Debtor 2      Brian      Mark      White  
First Name      Middle Name      Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.67</b>	<b>S Austin Emergency Center</b> Nonpriority Creditor's Name <b>PO Box 669152</b> Number      Street  <b>Dallas, TX 75266</b> City      State      ZIP Code  <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number      _____  <b>When was the debt incurred?</b> <u>9/2024</u>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>	<b>\$10,006.00</b>
<b>4.68</b>	<b>Scott Jensen</b> Nonpriority Creditor's Name <b>8309 Young Lane</b> Number      Street  <b>Austin, TX 78737</b> City      State      ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number      _____  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>	<b>\$0.00</b>

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_

Debtor 2     Brian     Mark     White

First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

**4.69**     **SKU 7 ATX Holdings LLC**     Last 4 digits of account number     \_\_\_\_\_     **\$0.00**

Nonpriority Creditor's Name

2802 Petes Path

Number     Street

Austin, TX 78731

City     State     ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Notice only

**4.70**     **SKU 7 Picklesmash PR Series I**     Last 4 digits of account number     \_\_\_\_\_     **\$0.00**

Nonpriority Creditor's Name

3802 Petes Path

Number     Street

Austin, TX 78731

City     State     ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**When was the debt incurred?** \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Notice only



Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
 Debtor 2 Brian Mark White  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.71</b>	<b>Small Business Financial Solutions LLC</b>	Last 4 digits of account number	<u>0 0 5 4</u>	<b>\$71,304.24</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>4500 East West Hwy, 6th Floor</u>		<u>5/2022</u>		
Number Street		As of the date you file, the claim is: Check all that apply.		
<u>Bethesda, MD 20814</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City State ZIP Code		Type of NONPRIORITY unsecured claim:		
Who incurred the debt? Check one.		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>business loan guaranty</u>		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
Remarks: Rapid Finance				
<b>4.72</b>	<b>Sofi Lending Corp</b>	Last 4 digits of account number	<u>x x x x</u>	<b>\$43,478.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>2750 E Cottonwood Pkwy</u>		<u>12/2021</u>		
Number Street		As of the date you file, the claim is: Check all that apply.		
<u>Salt Lake City, UT 84121</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City State ZIP Code		Type of NONPRIORITY unsecured claim:		
Who incurred the debt? Check one.		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>business loan guaranty</u>		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.73</b>	<b>Spectrum</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred?	<b>Various</b>	
<b>PO Box 60074</b>				
Number     Street				
<b>City of Industry, CA 91716-0074</b>				
City     State     ZIP Code				
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent				
<input type="checkbox"/> Unliquidated				
<input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify <b>Notice only</b>				

<b>4.74</b>	<b>SPS Commerce</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred?	<b>various</b>	
<b>PO Box 205782</b>				
Number     Street				
<b>Dallas, TX 75320-5782</b>				
City     State     ZIP Code				
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent				
<input type="checkbox"/> Unliquidated				
<input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify <b>Notice only</b>				

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
 Debtor 2 Brian Mark White  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

4.75	<b>Synchrony Bank (Care Credit)</b> Nonpriority Creditor's Name <u>Attn: Bankruptcy Dept</u> <u>PO Box 965060</u> Number Street <u>Orlando, FL 32896-5060</u> City State ZIP Code	Last 4 digits of account number <u>x x x x</u> When was the debt incurred? <u>various</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$15,425.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>			

4.76	<b>Synchrony Bank/Venmo</b> Nonpriority Creditor's Name <u>PO Box 965015</u> Number Street <u>Orlando, FL 32896</u> City State ZIP Code	Last 4 digits of account number <u>x x x x</u> When was the debt incurred? <u>various</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,200.00</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>			

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_

Debtor 2     Brian     Mark     White

First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.77</b>	<b>Texas Workforce Commission</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred?	<u>0.00</u>	
<b>OAG Bankruptcy &amp; Collection Div</b>				
<b>PO Box 12548 MC008</b>		As of the date you file, the claim is: Check all that apply.		
Number     Street		<input type="checkbox"/> Contingent		
<b>Austin, TX 78711</b>		<input type="checkbox"/> Unliquidated		
City     State     ZIP Code		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

<b>4.78</b>	<b>TRE Investments LLC</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred?	_____	
<b>PO Box 1219</b>		As of the date you file, the claim is: Check all that apply.		
Number     Street		<input type="checkbox"/> Contingent		
<b>Dripping Springs, TX 78620</b>		<input type="checkbox"/> Unliquidated		
City     State     ZIP Code		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.79</b>	<b>US Acute Care Solutions</b>	Last 4 digits of account number	<u>2</u> <u>5</u> <u>9</u> <u>9</u>	<b>\$522.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>PO Box 9820</b>		<u>6/2024</u>		
Number     Street		As of the date you file, the claim is: Check all that apply.		
<b>Coral Springs, FL 33075</b>		<input type="checkbox"/> Contingent		
City     State     ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

  

<b>4.80</b>	<b>Velocity Investments LLC</b>	Last 4 digits of account number	<u>5</u> <u>1</u> <u>3</u> <u>3</u>	<b>\$12,021.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>PO Box 788</b>		<u>various</u>		
Number     Street		As of the date you file, the claim is: Check all that apply.		
<b>Wall, NJ 07719</b>		<input type="checkbox"/> Contingent		
City     State     ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>business loan</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_

Debtor 2     Brian     Mark     White

First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.81</b>	<b>Villas at Beaver Creek</b>	Last 4 digits of account number	_____	<b>\$2,181.00</b>
Nonpriority Creditor's Name		When was the debt incurred? <u>various</u>		
<b>1000 Meadow Creek Dr</b>				
Number     Street				
<b>Irving, TX 75038</b>		As of the date you file, the claim is: Check all that apply.		
City     State     ZIP Code		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>broken apartment lease</u>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

<b>4.82</b>	<b>WebBank/Shopify</b>	Last 4 digits of account number	_____	<b>\$0.00</b>
Nonpriority Creditor's Name		When was the debt incurred? <u>various</u>		
<b>100 Schockoe Skip 2nd Floor</b>				
Number     Street				
<b>Richmond, VA 23219</b>		As of the date you file, the claim is: Check all that apply.		
City     State     ZIP Code		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Notice only</u>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_

Debtor 2     Brian     Mark     White

First Name     Middle Name     Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<b>4.83</b>	<b>WSD Enterprises LTD</b> Nonpriority Creditor's Name <b>4707 Elsy Ave</b> Number     Street  <b>Dallas, TX 75209</b> City     State     ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number     _____  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Notice only</b></u>	<b>\$0.00</b>
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<b>4.84</b>	<b>Wyndham Vacation Resorts</b> Nonpriority Creditor's Name <b>6277 Sea Harbor Dr.</b> Number     Street  <b>Orlando, FL 32821</b> City     State     ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number     _____  <b>When was the debt incurred?</b> <u><b>2017</b></u>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u><b>Possible deficiency</b></u>	<b>\$0.00</b>
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**Remarks:** foreclosure of Club Wyndam Access Vacation Ownership Plan

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**1. United States Attorney General** On which entry in Part 1 or Part 2 did you list the original creditor?  
Name \_\_\_\_\_ Line 2.1 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims  
950 Pennsylvania Ave., N.W. ☐ Part 2: Creditors with Nonpriority Unsecured Claims

**Department of FHA** Last 4 digits of account number \_\_\_\_\_  
Number \_\_\_\_\_ Street \_\_\_\_\_  
**Washington, DC 20530**  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**2. United States Attorney/IRS** On which entry in Part 1 or Part 2 did you list the original creditor?  
Name \_\_\_\_\_ Line 2.1 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims  
**601 NW Loop 410 Ste. 600** ☐ Part 2: Creditors with Nonpriority Unsecured Claims

Number \_\_\_\_\_ Street \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_  
**San Antonio, TX 78316-5512**  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**3. Rausch Sturm LLP** On which entry in Part 1 or Part 2 did you list the original creditor?  
Name \_\_\_\_\_ Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
**15660 N Dallas Parkway, Ste 350** ☒ Part 2: Creditors with Nonpriority Unsecured Claims

Number \_\_\_\_\_ Street \_\_\_\_\_ Last 4 digits of account number 8 8 9 2  
**Dallas, TX 75248**  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**4. Asset Recovery Solutions, LLC** On which entry in Part 1 or Part 2 did you list the original creditor?  
Name \_\_\_\_\_ Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
**2200 E Devon Ave Ste 200** ☒ Part 2: Creditors with Nonpriority Unsecured Claims

Number \_\_\_\_\_ Street \_\_\_\_\_ Last 4 digits of account number 0 7 4 4  
**Des Plaines, IL 60018-4501**  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**5. Credit Control, LLC** On which entry in Part 1 or Part 2 did you list the original creditor?  
Name \_\_\_\_\_ Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
**PO Box 546** ☒ Part 2: Creditors with Nonpriority Unsecured Claims

Number \_\_\_\_\_ Street \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_  
**Hazelwood, MO 63042-0546**  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**6. Javitch Block, LLC** On which entry in Part 1 or Part 2 did you list the original creditor?  
Name \_\_\_\_\_ Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
**1100 Superior Ave 19th Floor** ☒ Part 2: Creditors with Nonpriority Unsecured Claims

Number \_\_\_\_\_ Street \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_  
**Cleveland, OH 44114-2521**  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_



Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed - Additional Page**

<b>7.</b>	<b>Javitch Block LLC</b> Name <u>275 W Campbell Ste 312</u> Number     Street  <u>Richardson, TX 75080</u> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.6</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number     _ _ _ _
<b>8.</b>	<b>Javitch Block, LLC</b> Name <u>1100 Superior Ave 19th Floor</u> Number     Street  <u>Cleveland, OH 44114-2521</u> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.7</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number     _ _ _ _
<b>9.</b>	<b>Javitch Block LLC</b> Name <u>275 W Campbell Ste 312</u> Number     Street  <u>Richardson, TX 75080</u> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.7</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number     _ _ _ _
<b>10.</b>	<b>Capital Management Services</b> Name <u>698 1/2 S Ogden St</u> Number     Street  <u>Buffalo, NY 14206-2317</u> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.9</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number     _ _ _ _
<b>11.</b>	<b>Portfolio Recovery Associates LLC</b> Name <u>120 Corporate Blvd #100</u> Number     Street  <u>Norfolk, VA 23502-4962</u> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.9</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number     _ _ _ _
<b>12.</b>	<b>Capital Management Services</b> Name <u>698 1/2 S Ogden St</u> Number     Street  <u>Buffalo, NY 14206-2317</u> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.13</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number <u>6</u> <u>5</u> <u>8</u> <u>4</u>

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed - Additional Page**

<b>13.</b>	<b>Glass Mountain Capital LLC</b> Name <u>1375 Woodfield Rd Ste 400</u> Number Street <u>Schaumburg, IL 60173-5426</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.13</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>14.</b>	<b>Marlette Funding LLC</b> Name <u>3419 Silverside Road</u> Number Street <u>Wilmington, DE 19810</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.13</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>15.</b>	<b>Cavalry Portfolio Services</b> Name <u>PO Box 27288</u> Number Street <u>Tempe, AZ 85285-7288</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.16</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>16.</b>	<b>Cavalry SPV I LLC</b> Name <u>1 American Ln Ste 220</u> Number Street <u>Greenwich, CT 06831-2563</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.16</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>17.</b>	<b>Portfolio Recovery Services</b> Name <u>120 Corporate Blvd</u> Number Street <u>Norfolk, VA 23502</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.18</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>18.</b>	<b>Midland Credit Management</b> Name <u>350 Camino De La Reina Ste 100</u> Number Street <u>San Diego, CA 92108-3007</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.19</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed - Additional Page**

<b>19.</b>	<b>Midland Credit Management</b> Name <u>350 Camino De La Reina Ste 100</u> Number Street  <u>San Diego, CA 92108-3007</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.21</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>5 1 7 3</u>
<b>20.</b>	<b>Altus Receivables Management</b> Name <u>2121 Airline Dr #520</u> Number Street  <u>Metairie, LA 70002</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.22</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>4 7 3 0</u>
<b>21.</b>	<b>LVNV Funding LLC</b> Name <u>Po Box 10497</u> Number Street  <u>Greenville, SC 29603-0497</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.23</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>22.</b>	<b>Financial Recovery Services</b> Name <u>Po Box 21405</u> Number Street  <u>Eagan, MN 55121-1405</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.23</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>23.</b>	<b>Unifin, Inc</b> Name <u>Po Box 1608</u> Number Street  <u>Skokie, IL 60076-8608</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.23</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>24.</b>	<b>Resurgent Receivables LLC</b> Name <u>Po Box 10497</u> Number Street  <u>Greenville, SC 29603-0497</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.23</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed - Additional Page**

<b>25.</b>	<b>Unifin, Inc</b> Name <b>Po Box 1608</b> Number Street <b>Skokie, IL 60076-8608</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.24</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>26.</b>	<b>Resurgent Receivables LLC</b> Name <b>Po Box 10497</b> Number Street <b>Greenville, SC 29603-0497</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.24</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>27.</b>	<b>US Acute Care Solutions</b> Name <b>Po Box 9820</b> Number Street <b>Coral Springs, FL 33075-0820</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.28</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>28.</b>	<b>Frost Arnett</b> Name <b>Po Box 198988</b> Number Street <b>Nashville, TN 37219-8988</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.28</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>29.</b>	<b>Zwicker &amp; Assoc.</b> Name <b>80 Minuteman Rd</b> Number Street <b>Andover, MA 01810-1008</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.31</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>30.</b>	<b>Zwicker &amp; Ass</b> Name <b>Tone Lewis</b> <b>801 W. Old Settlers Blvd #220</b> Number Street <b>Round Rock, TX 78664</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.31</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed - Additional Page**

<b>31.</b>	<b>Jenkins Law Firm, PC</b> Name <b>Attn: Robert E Jenkins</b> <b>2221 Justin Rd # 119-480</b> Number     Street <b>Flower Mound, TX 75028-4848</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.32</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _ _ _ _
<b>32.</b>	<b>Zwicker &amp; Ass</b> Name <b>Tone Lewis</b> <b>801 W. Old Settlers Blvd #220</b> Number     Street <b>Round Rock, TX 78664</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.32</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _ _ _ _
<b>33.</b>	<b>Barnett &amp; Garcia</b> Name <b>3821 Juniper Trace Ste 108</b> Number     Street <b>Austin, TX 78738</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.32</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _ _ _ _
<b>34.</b>	<b>Egan Nelson LLP</b> Name <b>2911 Turtle Creek Blvd #1100</b> Number     Street <b>Dallas, TX 75219</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.33</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _ _ _ _
<b>35.</b>	<b>RGS Financial Inc</b> Name <b>PO Box 852039</b> Number     Street <b>Richardson, TX 75085-2039</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.36</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>8</u> <u>7</u> <u>3</u> <u>6</u>
<b>36.</b>	<b>Velocity Investments LLC</b> Name <b>PO Box 788</b> Number     Street <b>Wall, NJ 07719</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.45</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _ _ _ _

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed - Additional Page**

<b>37.</b>	<b>Asset Recovery Solutions, LLC</b> Name <u>2200 E Devon Ave Ste 200</u> Number Street <u>Des Plaines, IL 60018-4501</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.45</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>38.</b>	<b>Cross River Bank</b> Name <u>885 Teaneck Rd</u> Number Street <u>Teaneck, NJ 07666</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.45</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>39.</b>	<b>LVNV Funding</b> Name <u>P.O. Box 10497</u> Number Street <u>Greenville, SC 29603-0497</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.45</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>40.</b>	<b>Resurgent Capital Services</b> Name <u>PO Box 510090</u> Number Street <u>Livonia, MI 48151-2273</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.45</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>41.</b>	<b>Scott &amp; Associates, PC</b> Name <u>PO Box 115220</u> Number Street <u>Carrollton, TX 75011</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.45</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>42.</b>	<b>Rausch Sturm LLP</b> Name <u>300 N. Executive Dr. Ste 200</u> Number Street <u>Brookfield, WI 53005</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.45</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed - Additional Page**

<b>43.</b>	<b>MRS Associates</b> Name <u>1930 Olney Ave</u> Number Street <u>Cherry Hill, NJ 08003</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.46</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>5 4 7 7</u>
<b>44.</b>	<b>Swift Financial</b> Name <u>Attn: Bankruptcy Notice</u> <u>3505 Silverside Rd</u> Number Street <u>Wilmington, DE 19810</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.46</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>45.</b>	<b>Uncapped Ltd</b> Name <u>8 The Green #B</u> Number Street <u>Dover, DE 19901</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.48</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>46.</b>	<b>Carson Smithfield, LLC</b> Name <u>PO Box 9216</u> Number Street <u>Old Bethpage, NY 11804</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.51</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>47.</b>	<b>Morgan Cohen &amp; Bach</b> Name <u>7225 N. Mona Lisa Rd. #200</u> Number Street <u>Tucson, AZ 85741</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.53</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>48.</b>	<b>Enoch Kever PLLC</b> Name <u>Gary Zausmer</u> <u>7600 N. Capital of TX Hwy Bldg B, #200</u> Number Street <u>Austin, TX 78731</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.57</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>7 9 9 7</u>

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed - Additional Page**

<b>49.</b>	<b>Round Table Physicians Group LLC</b> Name <b>5701 W. Slaughter Lane Bldg G</b> Number     Street <b>Austin, TX 78749-6456</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.67</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _____
<b>50.</b>	<b>Michael Enrougthy</b> Name <b>4500 East West Hwy 6th Floor</b> Number     Street <b>Bethesda, MD 20814</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.71</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _____
<b>51.</b>	<b>LVNV Funding LLC</b> Name <b>c/o Resurgent Capital Services</b> <b>Po Box 10497</b> Number     Street <b>Greenville, SC 29603-0497</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.72</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _____
<b>52.</b>	<b>LVNV Funding LLC</b> Name <b>P.O. Box 740281</b> Number     Street <b>Houston, TX 77274</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.72</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _____
<b>53.</b>	<b>Zwicker &amp; Associates</b> Name <b>801 E. Old Settlers Blvd #220</b> Number     Street <b>Round Rock, TX 78664</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.72</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>5</u> <u>0</u> <u>0</u> <u>3</u>
<b>54.</b>	<b>Santander Bank, N.A.</b> Name <b>75 State Street</b> Number     Street <b>Boston, MA 02109</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.72</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _____



Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_  
Debtor 2 Brian Mark White  
First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed - Additional Page**

<b>55.</b>	<b>Cross River Bank</b> Name <b>885 Teaneck Rd</b> Number Street <b>Teaneck, NJ 07666</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.72</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>56.</b>	<b>Capital Management Services, LP</b> Name <b>698 1/2 S Ogden St</b> Number Street <b>Buffalo, NY 14206-2317</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.72</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>57.</b>	<b>MRS BPO, LLC</b> Name <b>Po Box 1050</b> Number Street <b>Cherry Hill, NJ 08034-0012</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.73</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>58.</b>	<b>Charter Communications</b> Name <b>400 Washington Blvd</b> Number Street <b>Stamford, CT 06902-6641</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.73</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>59.</b>	<b>CBE Group Inc</b> Name <b>PO Box 2635</b> Number Street <b>Waterloo, IA 50704-2635</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.73</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
<b>60.</b>	<b>Portfolio Recovery Associates LLC</b> Name <b>120 Corporate Blvd #100</b> Number Street <b>Norfolk, VA 23502-4962</b> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.76</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_  
Debtor 2     Brian     Mark     White  
First Name     Middle Name     Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed - Additional Page**

<b>61.</b>	<b>Texas Workforce Commission</b> Name <b>PO Box 205787</b> Number     Street <b>Dallas, TX 75320-5782</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.77</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _ _ _ _
<b>62.</b>	<b>Lending Club</b> Name <b>PO Box 884268</b> Number     Street <b>Los Angeles, CA 90088-4268</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.80</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _ _ _ _
<b>63.</b>	<b>Javitch Block LLC</b> Name <b>275 W Campbell Ste 312</b> Number     Street <b>Richardson, TX 75080</b> City     State     ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <b>4.80</b> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number     _ _ _ _

Debtor 1	<b>Christine</b>	<b>Elizabeth</b>	<b>White</b>	Case number (if known) _____
Debtor 2	<b>Brian</b>	<b>Mark</b>	<b>White</b>	
	First Name	Middle Name	Last Name	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. <u>\$0.00</u>
	6b.	Taxes and certain other debts you owe the government	6b. <u>\$11,000.00</u>
	6c.	Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e.	Total. Add lines 6a through 6d.	6e. <u><u>\$11,000.00</u></u>
			Total claim
Total claims from Part 2	6f.	Student loans	6f. <u>\$0.00</u>
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$634,061.24</u>
	6j.	Total. Add lines 6f through 6i.	6j. <u><u>\$634,061.24</u></u>

Fill in this information to identify your case:

Debtor 1	<b>Christine</b>	<b>Elizabeth</b>	<b>White</b>
	First Name	Middle Name	Last Name
Debtor 2	<b>Brian</b>	<b>Mark</b>	<b>White</b>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Western</b> District of <b>Texas</b>			
Case number			
(if known)			

☐ Check if this is an amended filing

## Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<b>ALPS</b> Name <b>PO Box 202344</b> Number Street <b>Austin, TX 78720-2344</b> City State ZIP Code	house rent
2.2	 Name  Number Street  City State ZIP Code	
2.3	 Name  Number Street  City State ZIP Code	
2.4	 Name  Number Street  City State ZIP Code	

Fill in this information to identify your case:

Debtor 1	<b>Christine</b>	<b>Elizabeth</b>	<b>White</b>
	First Name	Middle Name	Last Name
Debtor 2	<b>Brian</b>	<b>Mark</b>	<b>White</b>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Western</b> District of <b>Texas</b>			
Case number			
(if known)			

☐ Check if this is an amended filing

## Official Form 106H

# Schedule H: Your Codebtors

12/15

**Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.**

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ No  
☒ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

☐ No. Go to line 3.  
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☒ Yes. In which community state or territory did you live? **Texas**. Fill in the name and current address of that person.

**White, Brian Mark**

Name of your spouse, former spouse, or legal equivalent

**5844 Back Bay Lane**

Number Street

**Austin, TX 78739**

City State ZIP Code

☒ Yes. In which community state or territory did you live? **Texas**. Fill in the name and current address of that person.

**White, Christine Elizabeth**

Name of your spouse, former spouse, or legal equivalent

**5844 Back Bay Lane**

Number Street

**Austin, TX 78739**

City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.**

Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_

Debtor 2     Brian     Mark     White

First Name     Middle Name     Last Name

Additional Page to List More Codebtors

Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
Check all schedules that apply:	
<div>3.1</div> <div>Mashup Foods Inc</div> <div>Name</div> <div>PO Box 91512</div> <div>Number                      Street</div> <div>Austin, TX 78709</div> <div>City                                      State                                      ZIP Code</div>	<div><input type="checkbox"/> Schedule D, line _____</div> <div><input checked="" type="checkbox"/> Schedule E/F, line <u>2.1, 2.2, 4.10, 4.11, 4.14, 4.22, 4.25, 4.26, 4.27, 4.30, 4.33, 4.34, 4.38, 4.39, 4.40, 4.41, 4.42, 4.43, 4.44, 4.46, 4.47, 4.49, 4.50, 4.53, 4.57, 4.58, 4.59, 4.60, 4.61, 4.62, 4.63, 4.64, 4.65, 4.66, 4.68, 4.69, 4.70, 4.71, 4.72, 4.73, 4.74, 4.77, 4.78, 4.82, 4.83</u></div> <div><input type="checkbox"/> Schedule G, line _____</div>
<div>3.2</div> <div>PickleSmash</div> <div>Name</div> <div>3601 S. Congress Ave #G300</div> <div>Number                      Street</div> <div>Austin, TX 78704</div> <div>City                                      State                                      ZIP Code</div>	<div><input type="checkbox"/> Schedule D, line _____</div> <div><input checked="" type="checkbox"/> Schedule E/F, line <u>4.15</u></div> <div><input type="checkbox"/> Schedule G, line _____</div>
<div>3.3</div> <div>White's Quality Foods LLC</div> <div>Name</div> <div>3601 S. Congress Av #G300</div> <div>Number                      Street</div> <div>Austin, TX 78704</div> <div>City                                      State                                      ZIP Code</div>	<div><input type="checkbox"/> Schedule D, line _____</div> <div><input checked="" type="checkbox"/> Schedule E/F, line <u>4.59</u></div> <div><input type="checkbox"/> Schedule G, line _____</div>

Fill in this information to identify your case:

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>
	First Name	Middle Name	Last Name
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western</u>		District of <u>Texas</u>
Case number	<u></u>		
(if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Employment

#### 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

#### Employment status

- ☒ Employed  
☐ Not employed

#### Occupation

Mortgage Lender

#### Employer's name

Prime Lending

#### Employer's address

325 N. St. Paul #800

Number Street

Dallas, TX 75201

City State ZIP Code

#### Debtor 2 or non-filing spouse

- ☒ Employed  
☐ Not employed

catering and tech

Self employed

Number Street

City State ZIP Code

How long employed there? since 9/2013

2024

### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2.

For Debtor 1

For Debtor 2 or non-filing spouse

\$6,084.70

\$0.00

3. **Estimate and list monthly overtime pay.**

3.

+ \$0.00

+ \$0.00

4. **Calculate gross income.** Add line 2 + line 3.

4.

\$6,084.70

\$0.00

Debtor 1	<b>Christine</b>	<b>Elizabeth</b>	<b>White</b>	Case number (if known) _____
Debtor 2	<b>Brian</b>	<b>Mark</b>	<b>White</b>	
	First Name	Middle Name	Last Name	

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.		<b>\$6,084.70</b>	<b>\$0.00</b>
<b>5. List all payroll deductions:</b>			
5a. Tax, Medicare, and Social Security deductions	5a.	<b>\$1,050.44</b>	<b>\$0.00</b>
5b. Mandatory contributions for retirement plans	5b.	<b>\$0.00</b>	<b>\$0.00</b>
5c. Voluntary contributions for retirement plans	5c.	<b>\$182.36</b>	<b>\$0.00</b>
5d. Required repayments of retirement fund loans	5d.	<b>\$778.52</b>	<b>\$0.00</b>
5e. Insurance	5e.	<b>\$24.34</b>	<b>\$0.00</b>
5f. Domestic support obligations	5f.	<b>\$0.00</b>	<b>\$0.00</b>
5g. Union dues	5g.	<b>\$0.00</b>	<b>\$0.00</b>
5h. Other deductions. Specify: _____	5h. +	<b>\$0.00</b>	<b>\$0.00</b>
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	<b>\$2,035.66</b>	<b>\$0.00</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7.	<b>\$4,049.04</b>	<b>\$0.00</b>
<b>8. List all other income regularly received:</b>			
<b>8a. Net income from rental property and from operating a business, profession, or farm</b> Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	<b>\$0.00</b>	<b>\$6,532.00</b>
<b>8b. Interest and dividends</b>	8b.	<b>\$0.00</b>	<b>\$0.00</b>
<b>8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive</b> Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	<b>\$0.00</b>	<b>\$0.00</b>
<b>8d. Unemployment compensation</b>	8d.	<b>\$0.00</b>	<b>\$0.00</b>
<b>8e. Social Security</b>	8e.	<b>\$0.00</b>	<b>\$0.00</b>
<b>8f. Other government assistance that you regularly receive</b> Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	<b>\$0.00</b>	<b>\$0.00</b>
<b>8g. Pension or retirement income</b>	8g.	<b>\$0.00</b>	<b>\$0.00</b>
<b>8h. Other monthly income.</b> Specify: <b>See additional page</b>	8h. +	<b>\$1,075.00</b>	<b>\$869.00</b>
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	<b>\$1,075.00</b>	<b>\$7,401.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	<b>\$5,124.04</b>	<b>\$7,401.00</b>
		<b>+</b>	<b>= \$12,525.04</b>



Debtor 1     Christine     Elizabeth     White     Case number (if known) \_\_\_\_\_

Debtor 2     Brian     Mark     White

First Name     Middle Name     Last Name

11. **State all other regular contributions to the expenses that you list in *Schedule J*.**

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in *Schedule J*.

Specify: \_\_\_\_\_ 11. + \$0.00

12. **Add the amount in the last column of line 10 to the amount in line 11.** The result is the combined monthly income.

Write that amount on the *Summary of Your Assets and Liabilities and Certain Statistical Information*, if it applies

12. 

<b>\$12,525.04</b>
--------------------

**Combined  
monthly income**

13. **Do you expect an increase or decrease within the year after you file this form?**

☒ No.

☐ Yes. Explain:

--

Debtor 1 Christine Elizabeth White Case number (if known) \_\_\_\_\_

Debtor 2 Brian Mark White

First Name Middle Name Last Name

1. Fill in your employment information. <i>Continued.</i>	Debtor 1	Debtor 2 or non-filing spouse						
	Occupation	<u>part-time catering support</u> <u>bartender</u>						
	Employer's name	<u>HHS</u> <u>80 Proof LLC</u>						
	Employer's address	<u>12495 Silver Creek Rd</u> <small>Number Street</small> <u>1175 Chattahoochee Ave NW</u> <small>Number Street</small> <u>Dripping Springs, TX 78620</u> <small>City State ZIP Code</small> <u>Atlanta, GA 30318</u> <small>City State ZIP Code</small>						
	How long employed there?	<u>10/2023</u> <u>since 2/1/25</u>						
	<div>8h. Other monthly income For Debtor 1</div> <table border="1"> <thead> <tr> <th></th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td><u>part-time catering support net</u></td> <td><u>\$475.00</u></td> </tr> <tr> <td><u>Longstaff Bahamas Trust</u></td> <td><u>\$600.00</u></td> </tr> </tbody> </table>			Amount	<u>part-time catering support net</u>	<u>\$475.00</u>	<u>Longstaff Bahamas Trust</u>	<u>\$600.00</u>
		Amount						
<u>part-time catering support net</u>	<u>\$475.00</u>							
<u>Longstaff Bahamas Trust</u>	<u>\$600.00</u>							
<div>8h. Other monthly income For Debtor 2 or non-filing spouse</div> <table border="1"> <tbody> <tr> <td><u>Part - time job net avg.</u></td> <td><u>\$869.00</u></td> </tr> </tbody> </table>		<u>Part - time job net avg.</u>	<u>\$869.00</u>					
<u>Part - time job net avg.</u>	<u>\$869.00</u>							

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>	Case number (if known) _____
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>	
	First Name	Middle Name	Last Name	

8a. Attached Statement

**computer technician/catering**

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

1. Gross Monthly Income:	<u><b>\$8,431.00</b></u>
--------------------------	--------------------------

PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

2. Ordinary and necessary expense	<u><b>\$1,899.00</b></u>
3. Net Employee Payroll (Other than debtor)	<u><b>\$0.00</b></u>
4. Payroll Taxes	<u><b>\$0.00</b></u>
5. Unemployment Taxes	<u><b>\$0.00</b></u>
6. Worker's Compensation	<u><b>\$0.00</b></u>
7. Other Taxes	<u><b>\$0.00</b></u>
8. Inventory Purchases (Including raw materials)	<u><b>\$0.00</b></u>
9. Purchase of Feed/Fertilizer/Seed/Spray	<u><b>\$0.00</b></u>
10. Rent (Other than debtor's principal residence)	<u><b>\$0.00</b></u>
11. Utilities	<u><b>\$0.00</b></u>
12. Office Expenses and Supplies	<u><b>\$0.00</b></u>
13. Repairs and Maintenance	<u><b>\$0.00</b></u>
14. Vehicle Expenses	<u><b>\$0.00</b></u>
15. Travel and Entertainment	<u><b>\$0.00</b></u>
16. Equipment Rental and Leases	<u><b>\$0.00</b></u>
17. Legal/Accounting/Other Professional Fees	<u><b>\$0.00</b></u>
18. Insurance	<u><b>\$0.00</b></u>
19. Employee Benefits (e.g., pension, medical, etc.)	<u><b>\$0.00</b></u>
20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts	
TOTAL PAYMENTS TO SECURED CREDITORS	<u><b>\$0.00</b></u>
21. Other Expenses	
TOTAL OTHER EXPENSES	<u><b>\$0.00</b></u>
22. TOTAL MONTHLY EXPENSES (Add item 2 - 21)	<u><b>\$1,899.00</b></u>

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 1)	<u><b>\$6,532.00</b></u>
---	--------------------------



Fill in this information to identify your case:

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>
	First Name	Middle Name	Last Name
Debtor 2	<u>Brian</u>	<u>Mark</u>	<u>White</u>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u></u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☒ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

☐ No

☒ Yes. Fill out this information for each dependent.....

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

**Dependent's relationship to Debtor 1 or Debtor 2**

**Dependent's age**

**Does dependent live with you?**

Child

16

☐ No. ☒ Yes.

☐ No. ☐ Yes.

☐ No. ☐ Yes.

☐ No. ☐ Yes.

☐ No. ☐ Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No

☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$3,200.00

If not included in line 4:

4a. Real estate taxes

4a. \$0.00

4b. Property, homeowner's, or renter's insurance

4b. \$36.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$100.00

4d. Homeowner's association or condominium dues

4d. \$0.00

Debtor 1  
Debtor 2

**Christine  
Brian**

First Name

**Elizabeth  
Mark**

Middle Name

**White  
White**

Last Name

Case number (if known) \_\_\_\_\_

		Your expenses
5. <b>Additional mortgage payments for your residence</b> , such as home equity loans	5.	<u>\$0.00</u>
6. <b>Utilities:</b>		
6a. Electricity, heat, natural gas	6a.	<u>\$490.00</u>
6b. Water, sewer, garbage collection	6b.	<u>\$200.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$570.00</u>
6d. Other. Specify: _____	6d.	<u>\$0.00</u>
7. <b>Food and housekeeping supplies</b>	7.	<u>\$1,450.00</u>
8. <b>Childcare and children's education costs</b>	8.	<u>\$0.00</u>
9. <b>Clothing, laundry, and dry cleaning</b>	9.	<u>\$150.00</u>
10. <b>Personal care products and services</b>	10.	<u>\$300.00</u>
11. <b>Medical and dental expenses</b>	11.	<u>\$100.00</u>
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<u>\$450.00</u>
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	<u>\$250.00</u>
14. <b>Charitable contributions and religious donations</b>	14.	<u>\$0.00</u>
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	<u>\$280.00</u>
15b. Health insurance	15b.	<u>\$0.00</u>
15c. Vehicle insurance	15c.	<u>\$461.00</u>
15d. Other insurance. Specify: _____	15d.	<u>\$0.00</u>
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	<u>\$0.00</u>
17. <b>Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a.	<u>\$723.00</u>
17b. Car payments for Vehicle 2	17b.	<u>\$730.64</u>
17c. Other. Specify: _____	17c.	<u>\$0.00</u>
17d. Other. Specify: _____	17d.	<u>\$0.00</u>
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18.	<u>\$0.00</u>
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	19.	<u>\$0.00</u>
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a.	<u>\$0.00</u>
20b. Real estate taxes	20b.	<u>\$0.00</u>
20c. Property, homeowner's, or renter's insurance	20c.	<u>\$0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d.	<u>\$0.00</u>
20e. Homeowner's association or condominium dues	20e.	<u>\$0.00</u>

Debtor 1  
Debtor 2

**Christine  
Brian**

First Name

**Elizabeth  
Mark**

Middle Name

**White  
White**

Last Name

Case number (if known) \_\_\_\_\_

21. **Other.** Specify: \_\_\_\_\_

21. + \$0.00

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$9,490.64

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$9,490.64

23. **Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a. \$12,525.04

23b. Copy your monthly expenses from line 22c above.

23b. - \$9,490.64

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \$3,034.40

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Fill in this information to identify your case:

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Brian</u>	<u>Mark</u>	<u>White</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

## Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

### Part 1: Summarize Your Assets

#### 1. **Schedule A/B: Property** (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	<u>\$0.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	<u>\$198,256.86</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	<u>\$198,256.86</u>

#### Your assets

Value of what you own

### Part 2: Summarize Your Liabilities

#### 2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	<u>\$27,193.00</u>
---	--------------------

#### 3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	<u>\$11,000.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	<u>+ \$634,061.24</u>

Your total liabilities

\$672,254.24

#### Your liabilities

Amount you owe

### Part 3: Summarize Your Income and Expenses

#### 4. **Schedule I: Your Income** (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	<u>\$12,525.04</u>
---	--------------------

#### 5. **Schedule J: Your Expenses** (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	<u>\$9,490.64</u>
---	-------------------



Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

☒ Yes

7. What kind of debt do you have?

☐ Your debts are primarily consumer debts. Consumer debts are those “incurred by an individual primarily for a personal, family, or household purpose.” 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☒ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	<div></div>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<div></div>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<div></div>
9d. Student loans. (Copy line 6f.)	<div></div>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<div></div>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<div>+ <div></div></div>
9g. Total. Add lines 9a through 9f.	<div><div></div></div>

Fill in this information to identify your case:

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Brian</u>	<u>Mark</u>	<u>White</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

## Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

- ☒ No
- ☐ Yes. Name of person \_\_\_\_\_ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** /s/ Christine Elizabeth White  
Christine Elizabeth White, Debtor 1

**X** /s/ Brian Mark White  
Brian Mark White, Debtor 2

Date 05/01/2025  
MM/ DD/ YYYY

Date 05/01/2025  
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Brian</u>	<u>Mark</u>	<u>White</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

## Official Form 107

# Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Give Details About Your Marital Status and Where You Lived Before

#### 1. What is your current marital status?

- ☒ Married
- ☐ Not married

#### 2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
- ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
_____ Number Street	From _____ To _____	_____ Number Street	From _____ To _____
_____ City State ZIP Code		_____ City State ZIP Code	
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
_____ Number Street	From _____ To _____	_____ Number Street	From _____ To _____
_____ City State ZIP Code		_____ City State ZIP Code	

#### 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No
- ☒ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

Debtor 1  
Debtor 2

<b>Christine</b> <b>Brian</b>	<b>Elizabeth</b> <b>Mark</b>	<b>White</b> <b>White</b>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No

☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$21,223.00</u> <u>\$0.00</u>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$2,340.00</u> <u>\$33,727.00</u>
For last calendar year: (January 1 to December 31, <u>2024</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$81,851.00</u> <u>\$10,237.00</u>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$10,314.00</u> <u>\$75,761.00</u>
For the calendar year before that: (January 1 to December 31, <u>2023</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$121,468.00</u> <u>\$6,134.00</u>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$3,804.00</u> <u>\$2,237.00</u>

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

☐ No

☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<u>John S. Jones</u> <u>Longstaff Trust</u>	<u>\$9,970.00</u>	_____	_____
For last calendar year: (January 1 to December 31, <u>2024</u> ) YYYY	<u>John S. Jones</u> <u>Longstaff Trust</u>	<u>\$7,200.00</u>	_____	_____

Debtor 1	<b>Christine</b>	<b>Elizabeth</b>	<b>White</b>	
Debtor 2	<b>Brian</b>	<b>Mark</b>	<b>White</b>	
	First Name	Middle Name	Last Name	Case number (if known) _____

For the calendar year before that: (January 1 to December 31, <u>2023</u> ) YYYY	John S. Jones	\$1,800.00		
	Longstaff Trust	(3,000.00)		
	capital gains	\$10,000.00		
	gift from grandfather	\$15,463.00		
	John Steven Jones Trust FBO Liz			

**Part 3:** List Certain Payments You Made Before You Filed for Bankruptcy

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

☒ **No.** **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as “incurred by an individual primarily for a personal, family, or household purpose.”

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$8,575\* or more?

☒ **No.** Go to line 7.

☐ **Yes.** List below each creditor to whom you paid a total of \$8,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.

☐ **Yes.** **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ **No.** Go to line 7.

☐ **Yes.** List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name				<input type="checkbox"/> Mortgage
Number Street				<input type="checkbox"/> Car
				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
City State ZIP Code				<input type="checkbox"/> Other _____

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ **No**

☐ **Yes.** List all payments to an insider.

Debtor 1	<b>Christine</b>	<b>Elizabeth</b>	<b>White</b>		
Debtor 2	<b>Brian</b>	<b>Mark</b>	<b>White</b>		
	First Name	Middle Name	Last Name	Case number (if known) _____	

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name				
Number Street				
City State ZIP Code				

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
- ☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name				
Number Street				
City State ZIP Code				

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
- ☒ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title	collection	CCL #2 Travis County	<input type="checkbox"/> Pending
		Court Name	<input type="checkbox"/> On appeal
Case number		1700 Guadalupe	<input checked="" type="checkbox"/> Concluded
		Number Street	
		Austin, TX 78701	
		City State ZIP Code	

Debtor 1  
Debtor 2

Christine  
Brian

Elizabeth  
Mark

White  
White

Case number (if known)

First Name

Middle Name

Last Name

		Nature of the case	Court or agency	Status of the case
Case title	<b>Ecommerce Funding et al v. Mashup Foods Inc et al</b>	collection/guaranty	<b>445th District Court Travis County</b> Court Name <b>111 Guadalupe</b> Number Street <b>Austin, TX 78701</b> City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	<b>D-1-GN-23-007997</b>			
Case title	<b>Discover Bank v. Christine White</b>	debt collection	<b>Travis County Justice Court, Pct 3</b> Court Name <b>8656 W US Hwy 71 Ste 200</b> Number Street <b>Austin, TX 78735-8391</b> City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	<b>JC-CV-24-001942</b>			
Case title	<b>Discover Bank v. Brian M. White</b>	debt collection	<b>Travis County Court at Law #2</b> Court Name <b>PO Box 149325</b> Number Street <b>Austin, TX 78714</b> City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	<b>C-1-CV-23-004195</b>			
Case title	<b>American Express National Bank v. Christine White</b>	debt collection	<b>Travis County Court at Law #2</b> Court Name <b>PO Box 149325</b> Number Street <b>Austin, TX 78714</b> City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number	<b>C-1-CV-23-005382</b>			
Case title	<b>Small Business Financial Solutins LLC v. Mashup Foods Inc et al</b>	debt collection	<b>Circuit Court for Montgomery County Maryland</b> Court Name <b>50 Maryland Ave</b> Number Street <b>Rockville, MD 20850</b> City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	<b>C-15-005512</b>			
Case title	<b>Bank of Americ NA v. Brian White</b>	debt collection	<b>Travis County Justice Court, Pct 3</b> Court Name <b>8656 W US Hwy 71 Ste 200</b> Number Street <b>Austin, TX 78735-8391</b> City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	<b>J3-CV-24-002616</b>			

Debtor 1 **Christine** **Elizabeth** **White**  
Debtor 2 **Brian** **Mark** **White**  
First Name Middle Name Last Name Case number (if known) \_\_\_\_\_

	Nature of the case	Court or agency	Status of the case
Case title <b>Bank of America N.A v. Brian White</b>	debt collection	<b>Travis County Justice Court, Pct 3</b>	<input checked="" type="checkbox"/> Pending
Case number <b>J3-CV-24-002617f</b>		Court Name <b>8656 W US Hwy 71 Ste 200</b> Number Street <b>Austin, TX 78735-8391</b> City State ZIP Code	<input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title <b>Velocity Investments LLC assignee of Lending Club Corporation assignee of Web Bank v. Christine White</b>	debt collection	<b>Travis County Justice Court, Pct 3</b>	<input checked="" type="checkbox"/> Pending
Case number <b>J3-CV-25000311</b>		Court Name <b>8656 W US Hwy 71 Ste 200</b> Number Street <b>Austin, TX 78735-8391</b> City State ZIP Code	<input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?  
Check all that apply and fill in the details below.

☒ No. Go to line 11.

☐ Yes. Fill in the information below.

	Describe the property	Date	Value of the property
Creditor's Name			
Number Street			
City State ZIP Code			
	Explain what happened		
	<input type="checkbox"/> Property was repossessed.		
	<input type="checkbox"/> Property was foreclosed.		
	<input type="checkbox"/> Property was garnished.		
	<input type="checkbox"/> Property was attached, seized, or levied.		

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

☒ No

☐ Yes. Fill in the details.

	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name			
Number Street			
City State ZIP Code			
Last 4 digits of account number: XXXX- _ _ _ _			



Debtor 1 **Christine** **Elizabeth** **White**  
 Debtor 2 **Brian** **Mark** **White**

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First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

☒ No

☐ Yes

**Part 5:** List Certain Gifts and Contributions

**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

☒ No

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift  _____ _____ Number Street _____ City State ZIP Code _____ Person's relationship to you _____		_____ _____	_____ _____

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?**

☒ No

☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name  _____ _____ Number Street _____ City State ZIP Code _____		_____ _____	_____ _____

Debtor 1 **Christine** **Elizabeth** **White**  
Debtor 2 **Brian** **Mark** **White**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 6:** List Certain Losses

**15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

☒ No

☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost

**Part 7:** List Certain Payments or Transfers

**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

☒ Yes. Fill in the details.

Law Office of Michael Baumer	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	attorney fees ; ; ; ;	3/13/2024	\$2,122.00
Po Box 1818		4/23/24	\$500.00
Number Street		5/14/24	\$500.00
Liberty Hill, TX 78642-1818		6/17/24	\$500.00
City State ZIP Code		7/17/24	\$500.00
Email or website address		8/14/24	\$500.00
Person Who Made the Payment, if Not You			
Abacus Credit Counseling	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	credit counseling & education	11/13/2024	\$40.00
17337 Ventura Blvd #205			
Number Street			
Encino, CA 91316			
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  
Do not include any payment or transfer that you listed on line 16.

- ☒ No
- ☐ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			
Number Street			
City State ZIP Code			

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).  
Do not include gifts and transfers that you have already listed on this statement.

- ☐ No
- ☒ Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
<b>John Jones</b> Person Who Received Transfer <b>no address</b> Number Street City State ZIP Code Person's relationship to you <b>brother</b>	Debtor receives her brother's \$600 per month trust fund deposit into her account as he does not have a bank account and is in and out of jail. She then transfers the funds out to his commissary account or other friends who then give him the cash.		<u>monthly</u> <u>since 8/2024</u>
<b>unrelated third parties</b> Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you <b>none</b>	\$400 cash for sale of clothing and furniture		<u>12/2024</u>

Debtor 1 **Christine** **Elizabeth** **White**  
Debtor 2 **Brian** **Mark** **White**  
First Name Middle Name Last Name Case number (if known) \_\_\_\_\_

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No  
☐ Yes. Fill in the details.

Name of trust _____ _____	Description and value of the property transferred	Date transfer was made

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☐ No  
☒ Yes. Fill in the details.

Name of Financial Institution  Number Street  City State ZIP Code	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	XXXX- 1 5 3 1	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	9.4.24	\$0.00

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1 **Christine** **Elizabeth** **White**  
Debtor 2 **Brian** **Mark** **White**  
First Name Middle Name Last Name Case number (if known) \_\_\_\_\_

Who else had access to it?		Describe the contents	Do you still have it?
<hr/>			<input type="checkbox"/> No
<hr/>			<input type="checkbox"/> Yes
<hr/>			
<hr/>			
Name of Financial Institution		Name	
<hr/>		<hr/>	
Number Street		Number Street	
<hr/>		<hr/>	
<hr/>		City State ZIP Code	
City State ZIP Code			

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☐ No  
☒ Yes. Fill in the details.

Who else has or had access to it?		Describe the contents	Do you still have it?
<hr/>		furniture, glassware	<input type="checkbox"/> No
<hr/>			<input checked="" type="checkbox"/> Yes
<hr/>			
<hr/>			
SpareBox Storage		Name	
<hr/>		<hr/>	
701 W IOOP 340		Number Street	
<hr/>		<hr/>	
<hr/>		City State ZIP Code	
Austin, TX 78712			
City State ZIP Code			

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☐ No  
☒ Yes. Fill in the details.

Where is the property?	Describe the property	Value
<hr/>	laptop	<hr/>
<hr/>		\$500.00
<hr/>		
<hr/>		
Prime Lending		
<hr/>	<hr/>	
Owner's Name	Number Street	
<hr/>	<hr/>	
325 N. Saint Paul St #800	City State ZIP Code	
<hr/>	<hr/>	
Number Street		
<hr/>		
<hr/>		
Dallas, TX 75201		
City State ZIP Code		

Debtor 1  
Debtor 2

<b>Christine Brian</b>	<b>Elizabeth Mark</b>	<b>White White</b>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

**Part 10:** Give Details About Environmental Information

**For the purpose of Part 10, the following definitions apply:**

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

**Report all notices, releases, and proceedings that you know about, regardless of when they occurred.**

**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**

☒ No

☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site _____ Number    Street		<div></div>	_____ City                      State    ZIP Code
Governmental unit _____ Number    Street			
City                      State    ZIP Code			

**25. Have you notified any governmental unit of any release of hazardous material?**

☒ No

☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site _____ Number    Street		<div></div>	_____ City                      State    ZIP Code
Governmental unit _____ Number    Street			
City                      State    ZIP Code			

**26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

☒ No

☐ Yes. Fill in the details.

Debtor 1	<b>Christine</b>	<b>Elizabeth</b>	<b>White</b>	Case number (if known) _____
Debtor 2	<b>Brian</b>	<b>Mark</b>	<b>White</b>	
	First Name	Middle Name	Last Name	

  

	<b>Court or agency</b>	<b>Nature of the case</b>	<b>Status of the case</b>
Case title _____	Court Name _____		<input type="checkbox"/> Pending
_____	Number _____ Street _____		<input type="checkbox"/> On appeal
Case number _____	City _____ State _____ ZIP Code _____		<input type="checkbox"/> Concluded

**Part 11: Give Details About Your Business or Connections to Any Business**

**27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☒ An officer, director, or managing executive of a corporation
- ☒ An owner of at least 5% of the voting or equity securities of a corporation
- ☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

**Mashup Foods Inc**  
Name \_\_\_\_\_

<b>Describe the nature of the business</b>	<b>Employer Identification number</b> Do not include Social Security number or ITIN.
food manufacturing	EIN: <u>8</u> <u>2</u> - <u>5</u> <u>1</u> <u>4</u> <u>9</u> <u>1</u> <u>2</u> <u>5</u>

**PO Box 91512**  
Number \_\_\_\_\_ Street \_\_\_\_\_  
**Austin, TX 78709**  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

<b>Name of accountant or bookkeeper</b>	<b>Dates business existed</b>
Mike Lucas	From <u>3/2021</u> To <u>present</u>

**White's Quality Foods LLC**  
Name \_\_\_\_\_

<b>Describe the nature of the business</b>	<b>Employer Identification number</b> Do not include Social Security number or ITIN.
food manufacturing	EIN: <u>8</u> <u>2</u> - <u>5</u> <u>1</u> <u>4</u> <u>9</u> <u>1</u> <u>2</u> <u>5</u>

**3601 S. Congress Av #G300**  
Number \_\_\_\_\_ Street \_\_\_\_\_  
**Austin, TX 78704**  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

<b>Name of accountant or bookkeeper</b>	<b>Dates business existed</b>
Mike Lucas	From <u>4/2018</u> To <u>3/2021</u>

**28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.**

- ☒ No
- ☐ Yes. Fill in the details below.

Debtor 1	<b>Christine</b>	<b>Elizabeth</b>	<b>White</b>	Case number (if known) _____
Debtor 2	<b>Brian</b>	<b>Mark</b>	<b>White</b>	
	First Name	Middle Name	Last Name	

  

Date issued

  

Name _____	MM / DD / YYYY _____
Number _____ Street _____	
_____	
City _____	State _____ ZIP Code _____

**Part 12:** Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** /s/ Christine Elizabeth White  
 Signature of Christine Elizabeth White, Debtor 1

**X** /s/ Brian Mark White  
 Signature of Brian Mark White, Debtor 2

Date 05/01/2025

Date 05/01/2025

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).



Fill in this information to identify your case:

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Brian</u>	<u>Mark</u>	<u>White</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

## Official Form 108

# Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <u>Members Choice</u>	<input type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt: <u>2019 Honda Passport Elite</u>	<input type="checkbox"/> Retain the property and redeem it.	<input checked="" type="checkbox"/> Yes
	<input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	
Creditor's name: <u>Members Choice</u>	<input type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt: <u>2020 Volvo XC60</u>	<input type="checkbox"/> Retain the property and redeem it.	<input checked="" type="checkbox"/> Yes
	<input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	

Part 2:

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: ALPS _____ Description of leased property: house rent _____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Lessor's name: _____ Description of leased property: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Lessor's name: _____ Description of leased property: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Lessor's name: _____ Description of leased property: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Lessor's name: _____ Description of leased property: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Lessor's name: _____ Description of leased property: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Lessor's name: _____ Description of leased property: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Lessor's name: _____ Description of leased property: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Part 3:

Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Christine Elizabeth White  
 \_\_\_\_\_  
 Signature of Debtor 1

X /s/ Brian Mark White  
 \_\_\_\_\_  
 Signature of Debtor 2

Date 05/01/2025  
 \_\_\_\_\_  
 MM/ DD/ YYYY

Date 05/01/2025  
 \_\_\_\_\_  
 MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Brian</u>	<u>Mark</u>	<u>White</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

## Official Form 122A-1Supp

### Statement of Exemption from Presumption of Abuse Under § 707(b)(2) 12/15

File this supplement together with *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

#### Part 1: Identify the Kind of Debts You Have

1. **Are your debts primarily consumer debts?** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the *Voluntary Petition* (Official Form 101).
- ☒ No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.
- ☐ Yes. Go to Part 2.

#### Part 2: Determine Whether Military Service Provisions Apply to You

2. **Are you a disabled veteran** (as defined in 38 U.S.C. § 3741(1))?
- ☐ No. Go to line 3.
- ☐ Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
- ☐ No. Go to line 3.
- ☐ Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.
3. **Are you or have you been a Reservist or member of the National Guard?**
- ☐ No. Complete Form 122A-1. Do not submit this supplement.
- ☐ Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)
- ☐ No. Complete Form 122A-1. Do not submit this supplement.
- ☐ Yes. Check any one of the following categories that applies:
- ☐ I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.
- ☐ I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.
- ☐ I am performing a homeland defense activity for at least 90 days.
- ☐ I performed a homeland defense activity for at least 90 days, ending on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, *The Means Test does not apply now*, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The *exclusion period* means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later

Fill in this information to identify your case:

Debtor 1	<u>Christine</u>	<u>Elizabeth</u>	<u>White</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Brian</u>	<u>Mark</u>	<u>White</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u></u>		

Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

## Official Form 122A-1

### Chapter 7 Statement of Your Current Monthly Income

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

#### Part 1: Calculate Your Current Monthly Income

1. **What is your marital and filing status?** Check one only.

- ☐ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☐ **Living in the same household and are not legally separated.** Fill out both Column A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. <b>Your gross wages, salary, tips, bonuses, overtime, and commissions</b> (before all payroll deductions).	<u></u>	<u></u>
3. <b>Alimony and maintenance payments.</b> Do not include payments from a spouse if Column B is filled in.	<u></u>	<u></u>
4. <b>All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.</b> Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	<u></u>	<u></u>
5. <b>Net income from operating a business, profession, or farm</b>	<b>Debtor 1</b>	<b>Debtor 2</b>
Gross receipts (before all deductions)	<u></u>	<u></u>
Ordinary and necessary operating expenses	- <u></u>	- <u></u>
Net monthly income from a business, profession, or farm	<u></u>	<u></u>
		Copy here →
6. <b>Net income from rental and other real property</b>	<b>Debtor 1</b>	<b>Debtor 2</b>
Gross receipts (before all deductions)	<u></u>	<u></u>
Ordinary and necessary operating expenses	- <u></u>	- <u></u>
Net monthly income from rental or other real property	<u></u>	<u></u>
		Copy here →
7. <b>Interest, dividends, and royalties</b>	<u></u>	<u></u>

First Name

Middle Name

Last Name

Column A  
 Debtor 1

Column B  
 Debtor 2 or  
 non-filing spouse

8. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under

the Social Security Act. Instead, list it here:

For you:

For your spouse:

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

Total amounts from separate pages, if any.

11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

+ 
 
 + 
 
 =

Total current monthly income

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11: 
 

Copy line 11 here →

Multiply by 12 (the number of months in a year).
 

x 12

12b. The result is your annual income for this part of the form.
 

12b.

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

Fill in the number of people in your household.

Fill in the median family income for your state and size of household:
 

13.

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. ☐ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*  
 Go to Part 3.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*  
 Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X

/s/ Christine Elizabeth White

Signature of Debtor 1

X

/s/ Brian Mark White

Signature of Debtor 2

Date 05/01/2025

MM/ DD/ YYYY

Date 05/01/2025

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A–2.  
If you checked line 14b, fill out Form 122A–2 and file it with this form.

Additional Page For 122A-1		
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
10. Cont.		
part-time catering support net	\$0.00	
Longstaff Bahamas Trust	\$0.00	
Part - time job net avg.		\$0.00

IN THE UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF TEXAS  
AUSTIN DIVISION

IN RE: **White, Christine Elizabeth**  
**White, Brian Mark**

CASE NO

CHAPTER 7

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 05/01/2025 Signature /s/ Christine Elizabeth White  
Christine Elizabeth White, Debtor

Date 05/01/2025 Signature /s/ Brian Mark White  
Brian Mark White, Joint Debtor



ALPS  
PO Box 202344  
Austin, TX 78720-2344

Altus Receivables  
Management  
2121 Airline Dr #520  
Metairie, LA 70002

American Express  
Po Box 981537  
El Paso, TX 79998-1537

Ashley Furniture  
PO Box 965036  
Orlando, FL 32896

Asset Recovery Solutions, LLC  
2200 E Devon Ave Ste 200  
Des Plaines, IL 60018-4501

Austin Regional Clinic  
PO Box 660061  
Dallas, TX 75266-0061

Austin Regional Clinic  
Po Box 26726  
Austin, TX 78755-0726

Bank of America  
Po Box 982238  
El Paso, TX 79998-2238

Barclay  
PO Box 7247  
Philadelphia, PA 19170

Barclays Bank  
Po Box 60517  
City Industry, CA 91716-0517

Barnett & Garcia  
3821 Juniper Trace Ste 108  
Austin, TX 78738

BB4 a Series of Assure Labs  
2021 LLC  
190 N 10th St  
Brooklyn, NY 11211

Bee Cave Capital LLC  
832 Stonewall Ridge Lane  
Austin, TX 78746

Best Egg  
PO Box 42912  
Philadelphia, PA 19101

Brian Ruane  
1425 Boadway #435  
Seattle, WA 98122

Business Backer  
10856 Reed Hartman Hwy #100  
Cincinnati, OH 45242

Capital Management Services  
698 1/2 S Ogden St  
Buffalo, NY 14206-2317

Capital Management Services,  
LP  
698 1/2 S Ogden St  
Buffalo, NY 14206-2317

Capital One  
Po Box 60519  
City Industry, CA 91716-0519

Carson Smithfield, LLC  
PO Box 9216  
Old Bethpage, NY 11804

Cavalry Portfolio Services  
PO Box 27288  
Tempe, AZ 85285-7288

Cavalry SPV I LLC  
1 American Ln Ste 220  
Greenwich, CT 06831-2563

CBE Group Inc  
PO Box 2635  
Waterloo, IA 50704-2635

Charter Communications  
400 Washington Blvd  
Stamford, CT 06902-6641

Comenity Capital Bank/Ikea  
PO Box 182120  
Columbus, OH 43219

Coyote Logistics  
2545 W. Diversey Ave  
Chicago, IL 60647

Credit Control, LLC  
PO Box 546  
Hazelwood, MO 63042-0546

Credit One Bank  
PO Box 98872  
Las Vegas, NV 89193

Cross River Bank  
885 Teaneck Rd  
Teaneck, NJ 07666

Damon Neth  
10022 Estancia  
Austin, TX 78739

Data Council  
PO Box 74482  
Atlanta, GA 30374

DC Scott  
1202 W. Bitters Bldg 2  
San Antonio, TX 78216

Dell Children's Medical Center  
Po Box 204301  
Dallas, TX 75320-4301

Diligent Services  
2301 E. St Elmo #3-306  
Austin, TX 78744

Discover  
PO Box 71242  
Charlotte, NC 28272-1242

Egan Nelson LLP  
221 W. 6th St #900  
Austin, TX 78701

Egan Nelson LLP  
2911 Turtle Creek Blvd #1100  
Dallas, TX 75219

Elizabeth Berry  
address unknown  
liz.berry@gmail.com

Emblem  
PO Box 105555  
Atlanta, GA 30348

Enoch Kever PLLC  
Gary Zausmer  
7600 N. Capital of TX Hwy Bldg B, #200  
Austin, TX 78731

Financial Recovery Services  
Po Box 21405  
Eagan, MN 55121-1405

First National Legacy  
500 E. 60th St N.  
Sioux Falls, SD 57104

First Premier Bank  
3820 N. Louise Ave  
Sioux Falls, SD 57107

Frost Arnett  
Po Box 198988  
Nashville, TN 37219-8988

Getida  
1345 Queen Anne Road  
Teaneck, NJ 07666

Glass Mountain Capital LLC  
1375 Woodfield Rd Ste 400  
Schaumburg, IL 60173-5426

HEB  
2975 Regent Blvd #202531  
Irving, TX 75063

Internal Revenue Service  
Special Procedures Staff - Insolvency  
Po Box 7346  
Philadelphia, PA 19101-7346

James Cole  
190 N 10th St,  
Brooklyn, NY 11211

Javitch Block LLC  
275 W Campbell Ste 312  
Richardson, TX 75080

Javitch Block, LLC  
1100 Superior Ave 19th Floor  
Cleveland, OH 44114-2521

Jeffrey S. Pinsker, Trustee of  
Jeffrey  
S. Pinsker Revocable Trust  
555 E. 5th #3021  
Austin, TX 78701

Jenkins Law Firm, PC  
Attn: Robert E Jenkins  
2221 Justin Rd # 119-480  
Flower Mound, TX 75028-4848

Jonathan Skaare  
2504 S. 5th St Unit A  
Austin, TX 78704

Kapture Box  
3114 Garrison St  
San Diego, CA 92106

KeHe  
90t0 N. Schmid Rd  
Romeoville, IL 60446

Lending Club  
PO Box 884268  
Los Angeles, CA 90088-4268

LoanBuilder - PayPal  
1930 Olney Ave  
Cherry Hill, NJ 08003

LVNV Funding  
P.O. Box 10497  
Greenville, SC 29603-0497

LVNV Funding LLC  
c/o Resurgent Capital Services  
Po Box 10497  
Greenville, SC 29603-0497

LVNV Funding LLC  
P.O. Box 740281  
Houston, TX 77274

LVNV Funding LLC  
Po Box 10497  
Greenville, SC 29603-0497

Mandlik & Rhodes  
223 Applebee St  
Barrington, IL 60010

Marcus Goldman Sachs  
PO Box 45400  
Salt Lake City, UT 84145-0400



Marlette Funding LLC  
3419 Silverside Road  
Wilmington, DE 19810

Mashup Foods Inc  
PO Box 91512  
Austin, TX 78709

Matthew Gase  
903 Dartmoor Dr.  
Austin, TX 78746

Matthew O-Hayer  
2309 S. 4th St  
Austin, TX 78704

Members Choice  
PO Box 20248  
Waco, TX 76702-0247

Merrick Bank  
PO Box 9201  
Old Bethpage, NY 11804

Merrick Bank  
Attn: Bankruptcy  
PO Box 23356  
Pittsburgh, PA 15222

Michael Enroughty  
4500 East West Hwy 6th Floor  
Bethesda, MD 20814

Midland Credit Management  
350 Camino De La Reina Ste 100  
San Diego, CA 92108-3007

MJS Packaging  
500 E. St. Johns Ave #2620-1010  
Austin, TX 78752

Morgan Cohen & Bach  
7225 N. Mona Lisa Rd. #200  
Tucson, AZ 85741

MRS Associates  
1930 Olney Ave  
Cherry Hill, NJ 08003

MRS BPO, LLC  
Po Box 1050  
Cherry Hill, NJ 08034-0012

Nebraska Furniture Mart  
PO Box 2335  
Omaha, NE 68103-2335

Nelnet  
Po Box 82561  
Lincoln, NE 68501-2561

Onramp Funds, Inc  
and eCommerce Funding LLC  
7600 N. Capital of TX HWY Bldg 2, #200  
Austin, TX 78731

Optimal Counsel  
500 E. St Johns Ave #2620-1010  
Austin, TX 78752

Patillo Brown & Hill LLP  
PO Box 20725  
Waco, TX 76702-0725

PickleSmash  
3601 S. Congress Ave #G300  
Austin, TX 78704

Portfolio Recovery Associates  
LLC  
120 Corporate Blvd #100  
Norfolk, VA 23502-4962

Portfolio Recovery Services  
120 Corporate Blvd  
Norfolk, VA 23502

Rausch Sturm LLP  
300 N. Executive Dr. Ste 200  
Brookfield, WI 53005

Rausch Sturm LLP  
15660 N Dallas Parkway, Ste 350  
Dallas, TX 75248

Reap Commerce  
1920 McKinney Ave Floor 7  
Dallas, TX 75201

Reap Marketing LLC  
1920 McKinney Ave Floor 7  
Dallas, TX 75201

Renfro Foods  
815 Stella St  
Fort Worth, TX 76104

Resurgent Receivables LLC  
Po Box 10497  
Greenville, SC 29603-0497

Resurgent Capital Services  
PO Box 510090  
Livonia, MI 48151-2273

RGS Financial Inc  
PO Box 852039  
Richardson, TX 75085-2039

Ricardo Casas & Laurel Casas  
4224 Wyldwood Rd  
Austin, TX 78739

Richard Riccardi 2002  
Generation  
Skipping Trust  
661 Forest Oaks Dr.  
Mckinney, TX 75069

Robert A. Ziegler  
900 S. Center St.  
Austin, TX 78704

Roland Jones Jr  
381 CR 1070  
Hewitt, TX 76643

Round Table Physicians Group  
LLC  
5701 W. Slaughter Lane Bldg G  
Austin, TX 78749-6456

S Austin Emergency Center  
PO Box 669152  
Dallas, TX 75266

Santander Bank, N.A.  
75 State Street  
Boston, MA 02109

Scott & Associates, PC  
PO Box 115220  
Carrollton, TX 75011

Scott Jensen  
8309 Young Lane  
Austin, TX 78737

SKU 7 ATX Holdings LLC  
2802 Petes Path  
Austin, TX 78731

SKU 7 Picklesmash PR Series  
I  
3802 Petes Path  
Austin, TX 78731

Small Business Financial  
Solutions LLC  
4500 East West Hwy, 6th Floor  
Bethesda, MD 20814

Sofi Lending Corp  
2750 E Cottonwood Pkwy  
Salt Lake City, UT 84121

Spectrum  
PO Box 60074  
City of Industry, CA 91716-0074

SPS Commerce  
PO Box 205782  
Dallas, TX 75320-5782

Swift Financial  
Attn: Bankruptcy Notice  
3505 Silverside Rd  
Wilmington, DE 19810

Synchrony Bank (Care Credit)  
Attn: Bankruptcy Dept  
PO Box 965060  
Orlando, FL 32896-5060

Synchrony Bank/Venmo  
PO Box 965015  
Orlando, FL 32896

Texas Comptroller of Public  
Accounts  
PO Box 13528 Capitol Station  
Revenue Accounting Div - Bankruptcy  
Sect  
Austin, TX 78711

Texas Workforce Commission  
OAG Bankruptcy & Collection Div  
PO Box 12548 MC008  
Austin, TX 78711

Texas Workforce Commission  
PO Box 205787  
Dallas, TX 75320-5782

TRE Investments LLC  
PO Box 1219  
Dripping Springs, TX 78620

Uncapped Ltd  
8 The Green #B  
Dover, DE 19901

Unifin, Inc  
Po Box 1608  
Skokie, IL 60076-8608

United States Attorney  
General  
950 Pennsylvania Ave., N.W. Department  
of FHA  
Washington, DC 20530

United States Attorney/IRS  
601 NW Loop 410 Ste. 600  
San Antonio, TX 78316-5512

US Acute Care Solutions  
PO Box 9820  
Coral Springs, FL 33075

US Acute Care Solutions  
Po Box 9820  
Coral Springs, FL 33075-0820

Velocity Investments LLC  
PO Box 788  
Wall, NJ 07719

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Villas at Beaver Creek  
1000 Meadow Creek Dr  
Irving, TX 75038

WebBank/Shopify  
100 Schockoe Skip 2nd Floor  
Richmond, VA 23219

White's Quality Foods LLC  
3601 S. Congress Av #G300  
Austin, TX 78704

WSD Enterprises LTD  
4707 Elsy Ave  
Dallas, TX 75209

Wyndham Vacation Resorts  
6277 Sea Harbor Dr.  
Orlando, FL 32821



Zwicker & Ass  
Tone Lewis  
801 W. Old Settlers Blvd #220  
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801 E. Old Settlers Blvd #220  
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# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

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This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.  
*Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 — Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

**You should have an attorney review your decision to file for bankruptcy and the choice of chapter.**

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## Chapter 7: Liquidation

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	\$245	filing fee
	\$78	administrative fee
+	<b>\$15</b>	<b>trustee surcharge</b>
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- most domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

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## Chapter 11: Reorganization

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	\$1,167	filing fee
+	<b>\$571</b>	<b>administrative fee</b>
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

## Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	<b>\$78</b>	<b>administrative fee</b>
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

### Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	<b>\$78</b>	<b>administrative fee</b>
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts

### **Warning: File Your Forms on Time**

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

[http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

### **Bankruptcy crimes have serious consequences**

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### **Make sure the court has your mailing address**

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### **Understand which services you could receive from credit counseling agencies**

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

[http://justice.gov/ust/eo/hapcpa/ccde/cc\\_approved.html](http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html).

In Alabama and North Carolina, go to:  
<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

IN THE UNITED STATES BANKRUPTCY COURT  
FOR WESTERN DISTRICT OF TEXAS  
AUSTIN DIVISION

IN RE:  
Christine Elizabeth White  
Brian Mark White

CHAPTER 7

**RULE 2016(B) DISCLOSURE OF COMPENSATION FOR ATTORNEY FOR DEBTORS**

This sets out our agreement regarding this firm's representation of you in a Chapter 7 bankruptcy case involving issues and/or debts related to a current or prior business to be filed in Austin, Texas. We generally charge a "flat fee" for this type of representation for basic agreed upon services. This fee includes attorney and legal assistant time and routine out of pocket expenses (long distance, copies, postage, faxes).

**Total Attorney Fees: \$4,622.00**

**Total Attorney Fees Paid: \$4,622.00**

**Balance due : \$0.00**

The attorney fee for filing your case will be \$4,622, plus the filing fee of \$338 and the debt counseling/personal financial management class fee of \$40, plus any additional amounts set out below. If you choose to do the class over the telephone rather than online, the cost is \$60. A total retainer of \$5,000 must be paid prior to filing your case and is payable as follows: A typical case takes three appointments at our office prior to filing the case. The first is your free initial consultation. The second is the review of your completed homework package, at which a payment of \$2,500 is due. While we are preparing your case, you will make monthly payments of \$500, credited toward the total \$5,000. The third is the signing appointment at which any balance must be paid. If you want us to begin taking creditor calls, we require a payment of \$350, which will be credited to the retainer. We require payment of the full fee prior to filing if the debtor is a corporation.

**The services included in the flat fee for a business Chapter 7 are:**

**Pre-filing:**

- initial client meeting
- homework package meeting(s)
- signing meeting
- preparation of petition, schedules of assets and liabilities, and statement of financial affairs
- responding to creditor calls and correspondence

**Post-filing:**

- responding to creditor calls and correspondence
- attendance at creditors meeting
- review of security agreements and up to two reaffirmation agreements and attending hearings on the same
- preparation of and hearings on two motions to avoid non-purchase money liens or judicial liens on homestead and hearings on same
- preparation of responses to objections to exemptions

**Additional fees will be charged for the following:**

**Pre-filing:**

- credit report (\$30 individual, \$50 joint)
- excess of 30 creditors (30 - 70, add \$250; 70 - 100, add \$500; 100+ we will negotiate a fee)
- more than \$100,000 in unsecured debt (up to \$150,000, add \$250; more than \$150,000, add \$500; more than \$250,000, we will negotiate a fee)
- affidavit of special circumstances (\$350)
- non-filing spouse (\$250)
- more than four pre-filing meetings, including no shows or rescheduling with less than 48 hours notice (\$200 each)
- more than 2 two motions to avoid non-purchase money liens or judicial liens on homestead (\$75 each)
- dropping off your homework package without making an appointment to review it with an attorney (\$200)

Post-filing:

- motions to sell property (\$400)
- adding creditors after the initial filing (\$75 for first creditor, \$20 each additional creditor per amendment)
- amending schedules of exempt assets for assets not listed in homework package (\$150)
- contested motions for relief from stay (\$350 for mortgages; \$250 for vehicles)
- notice for a reset creditors meeting (\$75)
- responding to motions to dismiss for failure to file documents or to attend creditors meeting (\$250)
- responding to motions to dismiss by the U.S. Trustee based on ineligibility to file Chapter 7 (\$400 per hour plus expenses)
- adversary proceedings (\$400 per hour plus expenses)
- discovery (\$400 per hour plus expenses)

In the event that additional fees are charged, those fees will be required to be paid either pre-filing or post-filing, as designated above, unless otherwise agreed.

Our agreement to represent you **does not include** filing or defending adversary proceedings. In the event an adversary proceeding is filed against you, we will negotiate our representation and fee at that time. (An adversary would generally be a dispute regarding the dischargeability of a particular debt.) Our agreement to represent you in a bankruptcy case also does not constitute an agreement to initiate or defend any litigation on your behalf, whether in bankruptcy court or state court. **We do not defend state court collection lawsuits.**

Due to reporting errors by creditors and credit reporting agencies, your credit report after filing may not accurately reflect the status of your debts after your bankruptcy discharge. It is the responsibility of your individual creditors to report the status of your debts properly. We cannot guarantee that your creditors will do so. Although we can usually help you correct these problems, we do charge a fee for that service which is not included in the fee for the Chapter 7.

We will provide you with a copy of all of the documents which we file on your behalf in your case at the time they are filed. At the time your discharge is entered, the Court will mail you a copy of the discharge order. These documents are very important. They are the documents a home lender will typically require when you apply for a home loan. Once your case is closed, we send your file to offsite storage. If you request copies of these documents after we send your file offsite, we charge a \$75 fee for retrieval of these documents. In addition, our records are destroyed after 5 years and we may not be able to retrieve copies after that time.

By executing this agreement, you are representing to us that you will pay the agreed upon fee in the agreed upon installments. By executing this agreement you agree that if you fail to make the agreed upon payments of fees, we may cease representation of you immediately and that you will not oppose a motion to withdraw as your attorneys.

**This agreement is not binding until it is signed by both parties and the full retainer is paid. Our offer to represent you expires if you have not executed this engagement letter and paid at least \$600 within 90 days after the date of your consultation. If your case is not filed within 6 months of execution of this agreement, our agreement to represent you expires and we will keep any monies received for services rendered.**

The source of compensation was the Debtor(s). The source of compensation to be paid is the Debtor(s). I have not agreed to share the above described compensation with any other person, unless this client(s) was referred to us by the Lawyer Referral Service, in which case we have agreed to a 15% referral fee for all fees received over \$400.00.

Dated: 5/1/2025

/s/ Michael Baumer, SB 01931920  
Law Office of Michael Baumer  
PO Box 1818  
Liberty Hill, TX 78642

/S/ Christine Elizabeth White  
Christine Elizabeth White

/s/ Brian Mark White  
Brian Mark White